the white cane

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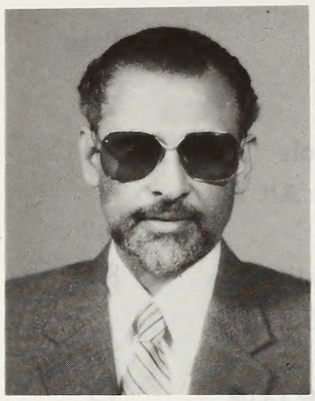


PREFACE

The White Cane, from which this magazine adopted its name, has become a universally accepted symbol of the visually handicapped person. Last year, the World Council for the Welfare of the Blind reaffirmed that October 15th of each year be declared as "International White Cane Day". On this day, the public will be exposed to the significance of the White Cane as an aid to the visually handicapped traveller.

Historically, visually handicapped persons have used canes and sticks of all shapes and sizes to assist them in their mobility. It was not until after the Second World War that the White Cane came into its own and gained ground as a recognised aid. Visually handicapped persons were trained scientifically in the use of the cane, and rehabilitation facilities all over the world adopted and updated modes of training which were developed in North America and in Europe. The White Cane indeed is truly the visually handicapped person's loyal, faithful and dependable companion.

I refer to my cane as "Excalibur". It serves me as well as the legendary sword serves King Arthur. Both protect their owners. They are not to be abused and if treated well, and the cause just, the sword and the cane alike respond magnificently. If abused, both render their owners helpless.

I attribute to my cane Excalibur, Lord Tennyson's description and properties of the arm of the Lady of the Lake in "Morte d' Arthur" as "white, samite, mystic and wonderful". These properties, as it were, extend to the White Cane. In other words, the cane becomes an integral part of the arm from which flows these almost divine attributes. Just as the arm of the Lady of the Lake reached out into the community, so also I feel does my own Excalibur.

I have therefore great pleasure in commending to you the White Cane which is this magazine as well as an aid to mobility.

Mr. Ron Chandran Dudley
President, SAB

A CHILD IN A SIGHTLESS WORLD

WHAT CAN SOCIETY DO TO HELP A CHILD ADAPT HIMSELF TO THE WORLD OF THE VISUALLY-HANDICAPPED?

Blindness at birth, through accidents, or through diseases are the main causes of the loss of vision. When a child's vision begins to deteriorate beyond remedy, he should be registered as a visually-handicapped of varying degrees, on certification from an opthalmologist. The child should then be admitted to the School for the Blind if he is of school-going age. If the blind person is over the school-going age, then he should be enlisted into a program for industrial training.

The parents of blind children should be convinced that blind children are not social parasites or a social embarrassment to the family. They should be informed that the blind child could be a useful member of society and contribute to society as a whole, and be given the rehabilitative training as soon as they are ready.

The presence of a blind child in a family may be an embarrassment to the parents concerned. Such parents tend to hide the child at home rather than avail him to the special rehabilitation, educational, and industrial training facilities which may be available. This is due to the fact that according to many religions and cultures, the presence of a handicapped child in a family is seen to be an affliction from God on the family, for the sins of their forebears.

The social worker must convince both the parents, and the blind child himself, that through rehabilitation, education and training, the child could be made to overcome his handicap and become a useful member of society and be gainfully employed. Rehabilitation, education and training programmes are necessary to help change the concept of a blind child being considered a social parasite to a blind child who is a respected individual within society, and one who is contributing to society through gainful employment.

On admission to school, the visually-handicapped child will receive varying degrees of social training, and academic knowledge. If a child is to be admitted to an open integrated programme, (that is, a programme where the sighted and visually-handicapped, mingle in the same classroom) he would be studying in a class with normal children but would receive in addition, extra lessons in braille reading and writing, the use of the normal typewriter, and the necessary tuition and equipment to help him cope with the class work. This task is performed by a resource teacher, who will cover a few schools in an allocated area. This programme is also extended to the adults who are too old to go to school. In this case however, they are taught home craft such as basketry, knitting and other skills to enable them to earn a living. Pre-school children will also be taught basic skills in reading, writing and arithmetic wherever possible. It is up to the parents of such children to teach them the skills of daily living and personal hygiene.

Visually-handicapped children can also be sent to a residential school system for the blind where braille reading and writing is incorporated into the day's curriculum. The child would also be taught the use of a normal typewriter. Besides the educational aspects, the child in a residential blind school will receive basic training in the skills of daily living which also includes the inculcation of good personal health habits.

The merits and demerits of both educational systems for the blind are numerous and controversial. However, some general remarks on both these educational systems could be summarised as follows:

In a residential educational system for the visually-handicapped, the child would be taught skills of daily living which would otherwise have to be taught by parents of the blind child in an open integrated programme. Children in a Residential School system would learn to mix socially with children of the same handicap, but would however, find difficulty in mingling and playing with children of normal vision. On the other hand, children in an open integrated programme would learn first to cope with visual impairment. However, such blind children have to overcome the sensitivity of daily reminders that unlike their sighted counterparts, they cannot achieve by the same methods as their sighted friends to accomplish daily tasks in the same manner.

Besides the learning of braille or the use of low vision aids for reading and writing, all visually-handicapped children should be taught orientation and mobility to enable them to move around independently.

Having gained the necessary rehabilitation, education and training, the visually-handicapped person could then become a useful member of society and be gainfully employed in an occupation.

THE BLIND CHILD IN THE FAMILY

Having a blind child in a family must surely be a great disappointment to both the parents – more so when more than one child is being born blind. Parents of blind children in most cases feel a sense of shock and despair over the fate of their visually handicapped child. Added to this are the feelings of guilt and shame, together with that of retribution which is being imposed upon them for the sins which they may have committed. These feelings lead some to totally reject their handicapped child or on the other extreme to overprotect them. Thus, the initial shock on having a blind child is rather great as most parents do have somewhat mixed feelings about their blind child.

In my family, my brother and myself are visually-handicapped, being blind from birth. My parents are farmers and there are nine children in the family. They were initially disappointed and grieved as being farmers and having two blind children meant that they have to provide extra care. However, my personal self instead of being a liability to my family has become an asset through the Singapore Association for the Blind.

The Association provides rehabilitation and other services to all registered blind persons – both young and old. As such, both my brother and myself were brought to be rehabilitated at the School for the Blind, this being a residential school. The aim of this system was to give us a varied training in various skills so that we will be independent in the future. Training included skills such as the proper way to wash and iron clothes, cleaning and dusting windows, simple kitchen skills such as putting a kettle on to boil and making a cup of tea, etc. Personally, I can say that I have benefited a great deal as it proved to be very useful in my stay at Raffles Hall at the then University of Singapore. At the hostel, I had to make use of all the skills I had acquired as I was entirely on my own.

Apart from training in the skills of daily living, the Association also helped us through our academic career. Our pre-primary and primary school years were spent at the School for the Blind. Then we moved on to Ahmad Ibrahim School for our secondary education. At this level, two resource teachers were provided to help us with our school work. The Association was very gracious as they saw me right through university education. My brother is also well taken care of as he is now in his final year at Nanyang Junior College.

All through our years of education, the Association provided us with textbooks in braille and also tactile diagrams and maps to help cultivate a clearer picture of our environment.

We were also given training in typing and this has been of great value to me especially during the years at the University when I had to type all my assignments.

Thus, from a totally dependent person, the rehabilitation training that I had received in school and later on at home has helped me manage my own personal life.

The visually handicapped I am sure has realised the great value of such training. I am indeed grateful to the Association and to all those who have put in their utmost effort to help me stand on my own as where I am to-day.

TOWARDS INDEPENDENT HEALTHY LIVING

The visually handicapped need not lag behind others. With the help of rehabilitative programmes, they too take their places as rightful members of society.

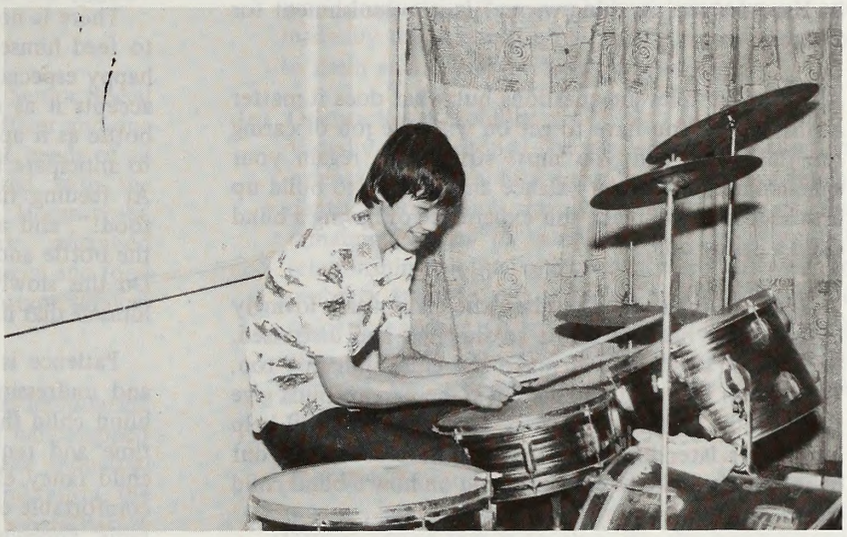
▲ Visually handicapped in gainful employment.

▲ Watch us making beds!

▲ Sharing views over tea-break.

▲ Hmm . . . mm . . . Music is soothing to the ears.

◀ Cooking lessons for the boys.



▶ Playing on the drums.

▶ It's fun-time for the school-children at recess time.

▲ Watch those plants growing well!

BRINGING UP A BLIND CHILD

For any couple of a visually handicapped child, the picture is a scene of shock and misery. Do not feel dejected, for in the present day, there is so much help around you that you will enjoy your little one once you know how to handle and to deal with the situation.

First and foremost, do correct the inner feeling of self-pity in yourselves and do not in turn over-protect your little child because it only produces a negative result that stays with your little one over a very long time. Firstly, the shock of a visually handicapped baby in your family will cause you to ask these questions:

1. Why has it happened to me?
2. Have I done anything wrong? Is it a punishment for me?

All these are relevant questions but what does it matter at this time? You have to get on with the job of caring for this baby and you must struggle to regain your spiritual and emotional balance and be able to build up attitudes that will make this experience of having a blind child a happy one.

Take for instance, a mother who cannot talk lovingly to her baby because she is so shocked and distressed. Because of this, she will make the child unhappy too. To develop his mind and his skills, the parents must give their child a feeling of security and poise that will help him in his later life. Now that you have accepted your baby, I would like to enlighten you on how a blind child learns .

Firstly, just like a normal baby, he will play with his own body. If he is not properly guided or taught, he will get his concepts all wrong which he will have to unlearn later on. For example, when he grows up, he would regard his elbow as his knee. To relate the names of the parts of the body to the child is of utmost importance however young he may be. As a blind child has no visual stimulation like a normal baby, it is important for the parents to encourage the child to explore and experiment. In order to develop his muscles, you must make him aware of his surroundings. Mother and father must explore with him to break down the narrow boundary of his own world.

How do we go about it? For example, he will not know about a rattle unless someone shakes it to make the noise or help him touch it. After touching it, he will start smelling and licking it. This will help motivate the child to learn more. You can provide different opportunities for him to feel with his finger and so "see" for himself things like cups and saucers etc. So long as the objects are not dirty or dangerous, there is no need to stop him. By his constant touching around, he develops his muscles.

Another important aspect of development is his understanding of the world around him so that he can grow in security and confidence. What a blind child needs to be taught now is how to speak and feed himself. He would not speak unless he is encouraged to. The normal child can copy our mouth movement but a blind child is at a disadvantage. He can only listen. The movement of the mouth and lips would indicate how a word is formed. Let the child feel the movement and he will succeed in learning to talk after a while. Too often the words he repeats has no meaning. The family has to interpret the word patterns to him. For example, "Say Good Morning", which would indicate milk time.

There is no exception to the handicapped in learning to feed himself. Always remember to make meal times happy especially when the child is in a passive mood and accepts it as routine. 'Seeing' babies can anticipate the bottle as it approaches. A blind child should be aroused to anticipate the bottle challenging him with the bottle. At feeding time, the mother should say, "Here is the food!", and at the same time the mother should shake the bottle and teach him to put his hand on the bottle. Do this slowly and let the child smell it to realize for himself that it is delicious and let him feel its warmth.

Patience is needed in teaching skills such as dressing and undressing, toileting and personal hygiene. For a blind child the process of learning to dress takes a long time and requires much repetition. Do not buy your child fancy clothes. It would only make the child uncomfortable especially a girl. As far as they are comfortably appealing and of harmonious colours, they are suitable.

Toilet training is just as important for any child as for your blind child, as it is a major step to independence. Hygiene is a necessary skill. Blind children need a lot of attention to develop into attractive persons. Who wants to touch someone who is dirty and smells bad? Help the little child to be appealing. You must help your child to wash his hands at appropriate times when he is young, help them to bathe and enjoy it, brush his teeth with him and help him comb his hair. Each of these skills takes time and you have to go through them step by step. As he becomes used to the routine let him do them more and more on his own. Remember that when a child is young from infancy to school age, the routine must not change.

As the child grows older, his horizon must be raised. The child should have education. School life for a blind child is at the Singapore School for the Blind. At this special school, the child mixes with the children of the same handicap and there is respect for each other. Social discipline is inculcated at the school. The child is open to community influences such as youth movements, the

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SERVICES PROVIDED BY THE REHABILITATION & SOCIAL SERVICES DEPARTMENT

The Rehabilitation & Social Services Department is one of the four departments of the Singapore Association for the Blind. The other three departments are the School for the Blind, the Administration and Appeals Department.

The services and facilities provided by the Rehabilitation & Social Services Department include the following:-

(a) **Social Work**
The **Social Work Unit** is staffed by a Senior Social Welfare Officer, one Social Welfare Officer and one Social Worker. The Unit caters to the needs of all visually handicapped people registered with the Singapore Association for the Blind. Home visits, counselling and guidance, casework, organised social outings for the aged blind, financial and food subsidies are some of the more important services provided by this unit.

(b) **Vocational Rehabilitation**
The **Industrial Training Centre** provides habilitation and rehabilitation training for visually handicapped people. Although the emphasis in the Industrial Training Centre is on vocational rehabilitation, the social, psychological and physical rehabilitation aspects of the blind person are also given importance.

Canework and woodwork are the two main programmes.

Other programmes include metalwork, braille, typing, developing daily living skills, creative development, domestic science, physical training, conversational English and Mandarin, developing communication skills.

A Training Officer and four Instructors carry out the programmes in the Industrial Training Centre. The intake capacity of trainees is thirty.

Normally, a person goes through a training period of two years. Trainees are given nominal allowances during the training period.

(c) **Occupational Workshop**
This Section is organised mainly for the multiple visually handicapped group. Contract work involving mainly simple routine cutting and packing of articles is secured from commercial firms.

(d) **Homeworkers' Programme**
In this programme, visually handicapped people, who for physical, emotional and other reasons are not employed in open employment, make canework products in their own homes. Arrangements are made by the Association to transport raw materials to them and to sell the finished products.

(e) **Orientation & Mobility**
Visually handicapped people require training in **orientation** & **mobility** in order to travel independently. Orientation involves the training of the remaining senses to establish one's position and relationship to other objects in the environment. In mobility training, one is taught to travel from one point to another. Orientation & mobility training is also provided by the Rehabilitation & Social Services Department. There are, presently, three orientation & mobility instructors.

(f) **Placement**
The Rehabilitation & Social Services Department runs a placement service. There is an Employment Officer whose task is to place visually handicapped people in open employment. He also provides on-the-job training and helps to sort out work problems.

(g) **Rehabilitation Teaching**
In this programme, the Rehabilitation teacher, provides skills of daily living, indoor mobility and orientation, communication, and management skills (hygiene, grooming) to visually and multiple visually handicapped pre-school children and adults. The aim of the programme, basically a home-based one, is to help develop potentials of the above described group to the fullest.

(h) **Psychological Services**
The Rehabilitation & Social Services Department also provides psychological services. The main aim of this service is to help our visually handicapped adjust to life competently and positively through assessments, counselling and psychotherapy.

REHABILITATION AND SOCIAL SERVICES SECTION

INDUSTRIAL TRAINING CENTRE

CANE-WORK SECTION

▲ Trainees making baskets

WOOD-WORK SECTION

Trainees are taught how to handle the different types of tools and to make the various wood articles.

◀ The multiple visually handicapped group busy packing SIA plastic stirrers into bags. These jobs are usually obtained from commercial firms on contract basis.

ORIENTATION AND MOBILITY UNIT ▶

The visually handicapped are taught how to move around independently.

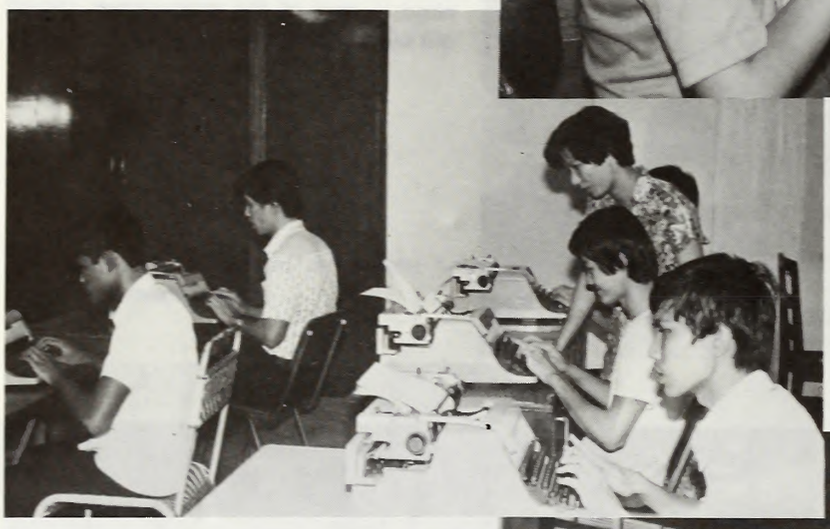
▼

SOCIAL WORK UNIT

Chinese New Year party for the aged blind — part of the programmes carried out by the Unit.

Issuing rations at one of the 10 community centres used as distributing points.

As part of the rehabilitation programme, type-writing, braille and metalwork are also taught.



A FOCUS ON THE AGED BLIND

Our latest statistics as on 15.10.1981 revealed that of the 1116 blind and visually handicapped people registered with the Association, 532 (48%) are of the age of 50 and above. Over the past few years, statistics also indicated a higher number of aged blind registered with the Singapore Association for the Blind.

Table 1 shows the number of people registered according to age at registration between 1975 and 1981.

Age Group	1975	1976	1977	1978	1979	1980	1981
0 – 5	6	8	5	6	6	9	4
6 – 11	10	6	6	12	2	3	4
12 – 16	2	4	1	2	5	8	1
17 – 30	5	4	4	5	3	7	6
31 – 40	4	0	4	4	4	7	9
41 – 50	7	1	2	2	8	13	8
50 & above	16	24	17	22	27	63	31
Total	50	47	39	53	55	110	63

There also seems to be a correlation between physical deterioration of the body and decline in normal functioning among the aged blind.

It was also found that four major diseases – diabetes, macular degeneration, glaucoma and cataract are responsible for blindness among the aged blind; diabetic retinopathy being the most common disease. Slightly more than 50% of the registered aged in 1980 and 1981 suffered from this category of disease.

Needs of the Aged Blind Persons

The needs of the aged blind in general do not differ greatly from the sighted aged population (taking into consideration the fact that with age certain problems develop and that blindness increase).

Basically, the needs of the aged blind include:

a) **Housing**

Majority of our aged blind are still staying with their families or relatives. By and large their family members still take care of them.

About 15% of the aged blind who either due to sickness, destitute, or old age are put into Aged/Community Homes and chronic sick hospitals. This group of people too, are well being looked after by the Homes. The services provided for them include food subsidies, financial subsidy and visits.

However with other aged persons (non-disabled and disabled) seeking admission to the homes, rejections for admission have been experienced by the visually handicapped.

b) **Health Care**

A good number of our aged blind suffer from other illnesses and disabilities. Majority of them are diabetic or high blood pressure patients. These group of people require long term treatment. The Association does provide medical subsidies for genuine cases. However our assistance is limited. Ideally the health care and medical services should be extended further to cater for the aged disabled.

c) **Income Maintenance**

Persons in the aging blind population often belong to the low-income group. Those who are single and have no means of living are often recipients of public assistance. Clients who do not qualify for the public assistance scheme but encounter difficulties financially are being assisted by the Association in terms of financial subsidies and provision of food parcels.

d) **Mobility**

Aged blind who became blind and who find difficulty in moving around will be given indoor mobility training when necessary.

Most of our aged blind prefer to remain indoors as they are fairly familiar with their home environment. Even on occasions that they have to be out (hospital visits etc.) they are usually accompanied by their own people.

f) **Vocational Training Opportunities**

Some of the aged blind people who are mentally and physically fit do desire to learn a skill so that their time can be well spent. The Association does provide opportunities for them to learn basketry.

In fact many of our home workers are aged blind who had one time or another been trained at our training centre.

On the whole, aged blind people are relatively satisfied with our services. There is however, room for improvement. In order to see that these elderly blind people lead a more fulfilling and meaningful life, the cooperation of the Government and communities are required.

Only through close cooperation and support from them can the life pattern of our elderly blind be improved.

BLINDNESS AND ITS PREVENTION

Commonest Causes of Blindness:

Singapore is today spared of the three greatest blinding scourges of mankind, known as TRACHOMA, KERATOMALACIA and RIVER BLINDNESS. On a global scale, these diseases are still the commonest causes of blindness in the world today. Millions of people are blinded in Africa, India and the Middle East by these diseases. Massive preventive measures are now being undertaken by international agencies for the prevention of blindness to try and stop the spread of these epidemic diseases. They involve more than just medical aid, because these diseases are related to poverty , poor hygiene and malnutrition.

Lack of Medical Facilities:

Singapore is also spared of the lack of medical facilities and expertise to deal with diseases that cause blindness. In India and Pakistan, mobile "eye camps" have been initiated, where thousands of eye operations are done everyday to give sight to the blind. This seems to be the only way to bring sight to the millions of people who are blind from diseases like CATARACT. More doctors and para-medical personnel are required and are being trained by international agencies to do these operations.

The Singapore Scene:

Although we are spared the causes of blindness in epidemic proportions seen in many of the developing countries, we do have our own pattern of blindness, which is fast becoming like that of any of the developed countries. This pattern of blindness changes with the changes which take place in the country's socio-economic environment. With industrialisation, we are seeing an increasing number of cases of blindness from road traffic accidents and from industrial accidents. With an ageing population, we are beginning to see more blindness from diseases due to old age. With better medicine, and more diabetics surviving, we see an increasing number of diabetics with eye problems and blindness from diabetic retinopathy. Clearly we have to be constantly on our guard, watching for new causesof blindness and taking the necessary measures to prevent their spread. Fortunately we are able to observe the trend in the more developed countries, which can give us an indication of the direction in which our own pattern of diseases will develop.

The commoner causes of blindness in our population today are:

(1) Cataract
(2) Glaucoma
(3) Retinal Detachment
(4) Diabetic Retinopathy
(5) Eye Injuries
(6) Optic Atrophy
(7) Congenital Disorders

The Fellow Eye:

It would be too technical to discuss the details of the preventive measures taken by ophthalmologists when dealing with his patients. Suffice it to say that when an ophthalmologist sees a patient with a blinding condition, he not only treats the diseased eye, but takes preventive measures to prevent the other (fellow) eye from developing the disease. For example in retinal detachment, a thorough examination of the fellow eye is done to look for any predisposing retinal tears. If present these are sealed to prevent retinal detachment from occurring in the good eye. Again, in glaucoma an operation is sometimes done to the fellow eye to prevent it from developing glaucoma. In diabetic retinopathy, laser photocoagulation can now be carried out to prevent blindness.

Early Detection:

The earlier the disease is detected, the better the visual prognosis for the patient. This is why in some countries, mass screening of the population for these blinding conditions is being carried out. This kind of project would of course be very expensive and would demand a great deal of manpower. A more practical way is Public Education. If the public is made aware of these blinding conditions, those with visual disorders will seek medical treatment earlier. For example, people who are severely myopic should know of the risks of Retinal Detachment. People with a family history of glaucoma should have their eyes examined for any early signs of glaucoma. Patients with diabetes should have routine eye examination to detect diabetic retinopathy.

Public Education is also important for the prevention of eye injuries. The recent enforcement on the use of safety-belts will surely reduce the incidence of blindness from road traffic accidents. Information should also be disseminated to factories regarding the importance of measures taken to prevent eye injuries. Emergency treatment should be available, especially for chemical injuries where the visual prognosis very often depends on whether an immediate and adequate irrigation of the eyes has been carried out.

Research:

There are still many eye diseases which are untreatable in spite of the advances made in technology. These are diseases which we still do not fully understand, such as many of the congenital developmental disorders of the eye. Ocular tissues are different from those found in other parts of the human body, because much of the eye is made up of transparent avascular tissues. A lot more research has to be done before we can learn how to prevent blindness from these diseases. This is being done in some of the more advanced centres in the world where the funds and expertise for research are available.

Conclusion:

A general overview of blindness and its prevention has been discussed with special reference to Singapore. A lot of work is being done by international agencies for the prevention of blindness on a global scale. In Singapore we are fortunate that we do not have blindness on an epidemic scale as seen in some of the developing countries. We are therefore able to control and prevent blindness from those conditions which are presently amenable to treatment.

OPEN DAY AT SINGAPORE ASSOCIATION FOR THE BLIND

S.A.B. held its annual Open House on August 21st and 22nd, 1981. The aim of such Open Days is to project the role of the S.A.B. as a service agency to the visually handicapped and to demonstrate the capabilities and talents of the visually handicapped – students and trainees.

We were very fortunate in having Mr. Sidek bin Saniff, Parliamentary Secretary to the Ministry of Trade and Industry and M.P. for Kolam Ayer, to officiate at and declare open our Open Day. Also present at the official opening were members of the Executive Committee, the various heads of departments, and students from the School for the Blind. The M.P. was given a conducted tour round the Association and was later followed by a tea reception.

Members of the public were very much enlightened by the activities and programmes carried out at the Association's Optacon Training Centre, the Industrial Training Centre, the Braille and Talking Library and at the School.

The School held an exhibition of various types of craftwork done by students. Students also demonstrated their academic and musical skills. In general, a majority of the visitors were attracted and impressed by the school band – drawing large crowds to the band room. Many had to wait for a long time before they could get a chance to see the performance. Another area which drew a large crowd was the Exhibition Room where braille equipment and gadgets were exhibited.

At the Industrial Training Centre, the visitors marvelled at the skill of the trainees, especially those at the Woodwork section. They were rather impressed by the very skillful and elegantly made tables, chairs and trollies. The Canework section drew a large crowd where basketry skills were demonstrated by the trainees on the spot.

Many were also impressed by the Optacon – a reading device which enables visually handicapped persons to read print. A demonstration was given on how to use the equipment.

There was also a large crowd at the film show organised by the Braille and Talking Book Library. Two films were shown which depicted the work of the Royal National Institute of the Blind, and the causes and prevention of blindness.

The Association's Open Day was well received by the general public, and we hope that our visitors have gone away with much thought about the visually-handicapped and their capabilities and talents, who are in their very own right useful members of our society.

From Page 8

Girl's Guide and Boy's Scout. You as parents have to get involved and help teach your child to be sensitive to the environment. Help the child to be involved in community life. Take them to social functions. It is healthy first to take your child to family dinners, birthday parties and then as he grows up, take him anywhere you go.

I would like to point out that what I have dealt with are only the insight to the situation of having a blind child. No two children develop exactly in the same way and no two families are exactly the same in their speech, actions or beliefs. But all children learn new skills in the same order. Therefore I hope parents will give them the help as advised, as early as possible. Should the need arise , please feel free to call at the Singapore Association for the Blind at 47-51, Toa Payoh Rise, Singapore 1129 where you will be helped and attended to by the appropriate staff.

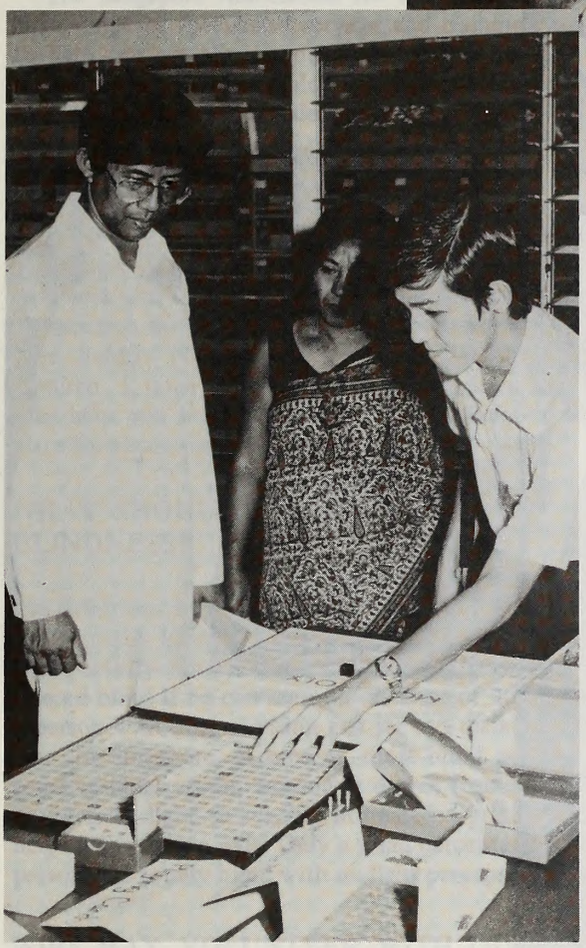
▲
Mr. Koh Poh Kwang, teacher at the School for the Blind presenting the opening speech.

▲
Students at the School for the Blind preparing for Open Day.

▲
'This is how we read braille'.

▶
Mr. Sidek bin Saniff at a music class session.

▲ Mr. Sidek bin Saniff observing a class session in English.

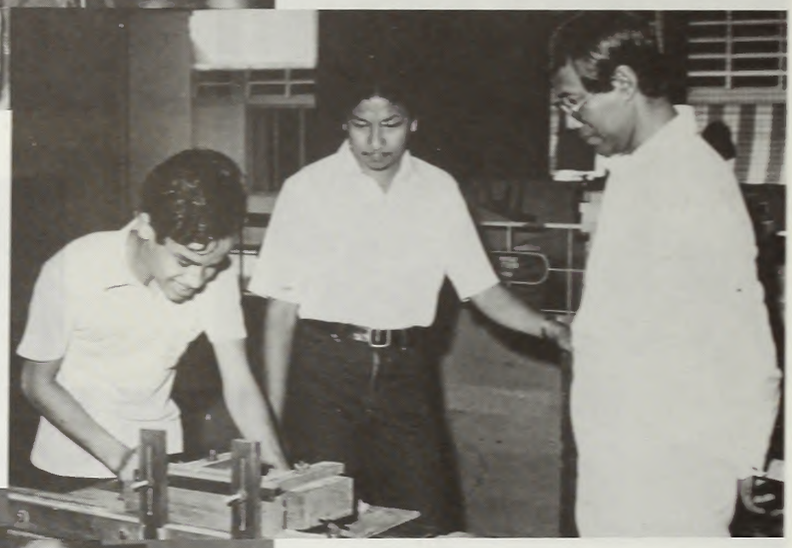


▲
Mr. Kwa Cheng Hock, teacher at the School for the Blind demonstrating steps towards mastering the English language through games.

▲
"I'll show you how to make beds". Demonstration by a Residential School pupil.

◀
Mr. Sidek bin Saniff meeting Miss Chan Poh Lin.

◀
Mr. Sidek bin Saniff at the Industrial Training Centre, Rehabilitation and Social Services Department on S.A.B.'s Open Day.



VOLUNTEERING FOR THE VISUALLY HANDICAPPED

The Singapore Association for the Blind provides a large range of specialised services and training designed to help our visually handicapped persons realise their potentials in order to develop full and independent lives. The Association cannot depend on its staff alone for some of the services it provides. It needs qualified volunteers to help deliver the high quality and diverse services its clients need.

Perhaps you may have thought of becoming a volunteer with our Association, but do not have sufficient information on how you could go about it, or you may have doubts of your ability to render the services required. I hope I will be able to enlighten you and thus help you to decide whether our Association is the place for you to serve as a volunteer.

WHAT SHOULD I KNOW ABOUT BLINDNESS?

Definitions of blindness range from complete loss of sight (totally blind) to various degrees of residual vision (the partially blind). In simple terms, a person is considered blind if he can see at a distance of 20 feet what a person with normal vision can see at a distance of 200 feet. In Singapore, at present, most blind people have some residual vision, varying in degree from the ability to perceive light to reading normal-size print with the help of low vision aids. Only a small percentage of blind persons are totally blind with no light perception at all.

WHO MAY VOLUNTEER WITH OUR ASSOCIATION?

Because our Association provides such diverse services in the area of education, rehabilitation and recreation, we need volunteers with varying experiences and expertise. There are opportunities for men and women, elderly retired persons and teenagers, housewives and highly skilled professionals.

Every potential volunteer must have the ability to accept and understand that handicapped persons are first of all human beings with their own feelings and interests. The volunteer should be a patient and outgoing person with the ability to take things in stride, and with a sense of humour.

WHAT AREA CAN I HELP IN?

You can either render your services at our Association's premises, or at the homes of some of our blind members, in particular those aged blind. You may even help in providing other non-institutionalised services such as car-pooling for the blind, accompanying the blind person to hospitals and shopping centres, etc.

WHAT MAY I EXPECT AS A VOLUNTEER?

You will first be briefed about the Association as well as the services it provides, after which you will receive a specific assignment in keeping with your interests, skills, and abilities. Once you have been chosen to serve in a particular area, the necessary arrangements will be made for you to begin your service. If the service requires training, you will receive on-the-job training and continuing guidance from our professional staff. Since your activities as a volunteer are an integral part of our Association's programmes, you will be asked to adhere to a definite time schedule with specific hours assigned – whether the time is as little as two or three hours a week or everyday for as many hours as you can contribute.

WHAT WILL THE ASSOCIATION EXPECT OF ME AS A VOLUNTEER?

Our Association expects you to give your time and skills to render a service – not solve a problem. To work with blind persons and not for them and to aid our employed staff in the provision of needed services. Our Association expects you to be dependable and willing to listen and learn, to accept supervision and constructive suggestions from staff, and to be loyal to the Association's purposes. You may also be asked to contribute ideas towards our programmes. In this respect, one should not be shy to do so.

WHAT ARE SOME OF THE SPECIFIC THINGS I MAY DO AS A VOLUNTEER?

As has been pointed out, this will of course depend on your interests and abilities in matching up with the types of services our Association provides. They include preschool, day and residential school services, rehabilitation services, library services, appeals, recreation and social programmes for all age groups. Here are some possible assignments you may undertake as a volunteer:-

(a) **Membership to our Association**: You may register to become one of our Association's members, either as an ordinary member paying five dollars per annum, or as a life member pay-

ing 100 dollars flat. Membership may eventually lead to serving in our Executive Committee.

(b) **Reading**: Persons of all ages are needed to read to blind persons at our braille section, our Braille and Talking Book Library, or even for individuals. You may be asked to read recreational, leisure, scientific, legal and technical materials. Reading extracts from textbooks, newspapers and magazines are also required.

(c) **Transcribing reading materials into special media**: Many of our visually handicapped persons rely on talking books (mainly cassettes), large printed books, or braille reproductions of written materials to perform daily activities, to fulfill their responsibilities at home, in school, and at work, and for personal entertainment and relaxation. Volunteers are needed to transcribe materials into these special media. Our Association will train you in some of these tasks or provide you with information regarding them.

(d) **Story telling sessions**: Our school and library organise story telling sessions for our younger members. Here, you may find yourself interested in doing just that. Although English is presently being used, it is hoped that in the near future, Malay and Mandarin will also be used.

(e) **Appeals**: Our Appeals Department from time to time needs help, not only in monetary terms, but also in physical energy. For instance help is required in the folding of ang pows, stamping of donation draw tickets, labelling of flag day containers, etc. Of course, if you are adventurous, perhaps you could give some of your time and energy to 'walk the streets' during our annual flag day and in the sale of our annual donation draw tickets.

(f) **Recreation**: Our Association provides a wide variety of individual and group recreational services. You may assist our staff in activities such as dancing, art and craft, indoor/outdoor games, (swimming, roller-skating, chess playing, etc.).

(g) **Library Work**: Our Association's library too needs your help. You can help in a number of services – cataloguing, classification, cutting and filing of newspaper materials and other similar library work.

(h) **Other Services**: You could provide your services as a teacher-aide, or in our Social Work Unit in being friends to our aged blind, organising outdoor activities (scouting, camping, etc.).

I hope I have enlightened and answered your questions about voluntary services for the visually handicapped persons, and if you do choose to volunteer in our Association, you will find it a stimulating and rewarding experience.

For more information about voluntary programmes and blindness, do contact our Association and we shall be most glad to help you so that you may be able to help our visually handicapped persons in Singapore.

It is you the volunteer, together with our staff members, who can make our Association one of the best in the provision of services to our visually handicapped persons.

REPORT OF THE ASIAN CONFERENCE FOR EDUCATION AND SOCIAL WELFARE OF THE VISUALLY HANDICAPPED HELD FROM 27TH OCTOBER 1981 TO 2ND NOVEMBER 1981 IN OSAKA, JAPAN

The conference was held in conjunction with the International Year of Disabled Persons. It was conducted in Japanese. The topics were mainly on the visually handicapped. There was a general discussion on the other disabled like the low-visioned, the spastic, the retarded and the multiple-handicapped. The countries who presented papers were Korea, Republic of China (Taiwan) and Singapore.

Korea and Republic of China (Taiwan) have a long standing history of disabled persons. They have schools for the blind. Most of them graduate as masseurs, fortune-tellers and some as professionals.

The host country began its Special Education many years ago (100 years). There are 72 special schools both government and private all over the island of Japan.

Most of the schools are residential. The choice of schools in the case of a multiple-handicapped child depends on the parents. Their Parents' Teachers' Associations are very strong.

Since the mode of travelling has improved, the number of residential pupils has dropped. In some of the schools the education programme for the visually handicapped caters from nursery level to adulthood, that is the pupil starts as a nursery pupil right up to tertiary level in the same building and compound. The programme provides for the nursery level, primary level, middle school, high school and tertiary level. They also have facilities for training (i) masseurs (ii) acupuncturists and (iii) professionals like teachers, musicians and pianotuners.

The schools are all well-equipped with teaching aids, sports and gymnastic equipment and musical instruments. Their braille department is computerised.

Each pupil is given an opportunity to reach the level he/she is capable of.

The next item of interest discussed is the NIPPON LIGHTHOUSE.

The centre opens its door to both young and old for counselling in adjustment and new jobs.

Below are the main activities of the Nippon Lighthouse which caters for the blind population in Japan.

I. ADJUSTMENT INDUSTRIAL VOCATIONAL TRAINING CENTER (AIVTC)

Blindness is a serious handicap and considered a disaster, but just grieving at it would not bring forth a better solution. To rehabilitate these people as independent, useful citizens with a high skill, this Center was established as a unique rehabilitation center in Japan.

(1) QUALIFICATION FOR ADMISSION

Both male and female above 18 years of age who finish their compulsory education are registered as visually handicapped persons.

(2) CAPACITY

In-student	50
Day-student	20

(3) ENROLMENT

In general, April and September.

(4) TRAINING

(a) ADJUSTMENT TRAINING

In general the training takes one year, but it depends upon the individual client. Orientation and mobility, communication, daily living techniques, and social study are the main contents of the training. Those who wish to take the vocational or professional training must finish this course first.

(b) VOCATIONAL TRAINING

1. Industrial Vocational Training

The training for light-engineering is given at the Centre, according to the aptitude of the client. Sometimes training is given at the commercial schools or industrial organisations.

2. Professional Training

* Telephone Switchboard Operator

After 3 months' training, they sit for the national examination and obtain the certificate. About 80 graduates have already left the Centre and are employed in the open industries and offices.

* Computer Programming

This training is subsidized by the Ministry of Health and Welfare. 20 months' training is given covering both hard ware and soft ware, as well as programming languages, PL/1 and COBOL, with cooperation by IBM Japan. The students for this course are chosen through selection tests.

(c) COUNSELLING

The full-time counsellor gives necessary advice and guidance to those who need them. Out-door sports and recreational programmes are provided to help them lead a healthy life both physically and mentally.

(d) GUIDE-DOG TRAINING CENTER

1. Enrolment

All round the year.

2. Qualification for Admission

Totally blind male and female between 18 to 55 years of age, who

(1) need the guide-dog in every day life

(2) wish to be socially independent

3. Training

One month training for independent travelling, travelling with the dog, how to take care of the dog, etc. The clients must live in the dormitory during the training period.

The Guide-dog Training Centre is located in the new site in Wakayama as part of the Mobility Centre.

(e) HOME FOR THE BLIND

Those who are registered as the visually handicapped and have the certificate to practise massage, acupuncture and moxibustion and who cannot find employment come to this Home. They practise their skills and treat the neighbourhood people.

Besides these regular programmes, which AIVTC provides, others include permanent training courses of O.M. instructors entrusted by the Ministry of Health and Welfare. There is also the special training on Optacon and Sonicguide for the visually handicapped children.

II. INFORMATION AND CULTURE CENTRE FOR THE BLIND (ICCB)

The aims of the ICCB are to prepare the braille books and recorded tapes of various fields and to render free lending service, internally and externally. Also, reading service, reference service, courses in Kana-typewriting, programs for leisure time activities, etc. are conducted for the Blind.

(1) BRAILLE BOOKS AND TAPES

Books . . . . . .about 55,000
Tapes . . . . . .about 47,000
Reference materials

(2) TRANSCRIPTION OF BRAILLE BOOKS

Compared with the ink-print books, there is still a shortage of braille books, especially professional books. To meet the request of the blind people, voluntary workers who were trained at this Centre are transcribing books for them.

(3) RECORDING

Talking books are progressively popular specially among the aged blind and newly trained persons. The voluntary readers who acquire the techniques through the course given at this Centre read the books during recording sessions at the studios. Besides the books, a monthly magazine "Journal in Voice" is issued and loaned out free of charge.

(4) READING SERVICE

This service is mainly for blind students where professional books, reference books and dictionaries are read.

(5) REFERENCE SERVICE

At the inquiries made by the blind people, the replies are given in tapes, braille, raised print, etc. The contents of the questions cover various fields, such as, Social Science, Natural Science, situations and problems of the blind, etc.

(6) COMMUNITY SERVICE

To help the blind integrate into their community smoothly, neighbouring people are invited for discussion sessions on problems encountered with the staff.

(7) VOLUNTEER SERVICE

Many parts of the programmes at the Nippon Lighthouse are supported by the work of volunteers. The Volunteer Service Section conducts the following training courses:

* Course for basic knowledge
* Training course of transcription
* Training course of reading and recording

III. BRAILLE PRINTING HOUSE

The main production is centred in the text-books of schools for the blind and many other books for children. Maps and various types of raised printing are produced, too.

(1) TEXT-BOOKS

Braille text-books and recorded educational materials are produced for the primary, middle and high schools for the blind in Japan.

(2) PRINTING IS SUBSIDIZED BY THE MINISTRY OF HEALTH AND WELFARE

Through the subsidy, juvenile books are printed and supplied through the Braille Libraries in each prefecture in Japan.

(3) BRAILLE MONTHLY MAGAZINE

"Reimei (Dawn)" is issued every month since 1938. It contains the articles, reviews, and explanations on political, economic, social and scientific problems and topics.

(4) BRAILLE MONTHLY HOME JOURNAL

"Light in Living", a home journal, is issued every month to give the blind necessary knowledge and information in household affairs.

(5) OTHER PUBLICATIONS

Information services made by the local government and organs of organizations are also printed here.

(6) REVISED EDITION OF CONCISE ENGLISH-JAPANESE DICTIONARY

The revised edition of the above dictionary which was published in 1963, is now under editing by the computer system.

(7) PUBLIC SERVICE

To promote the safe travelling of the visually handicapped people, guides for public safety devices, braille indication for vending machine, route maps, tangible maps of the cities etc. are printed.

PROBLEMS

More and more low-vision pupils are discovered. This was not fully discussed as they will be holding a seminar on Low-Vision next February.

The multiple-handicapped are on the increase and the visually handicapped on the decline.

The Ministry of Education supports all the projects of their special education programmes.

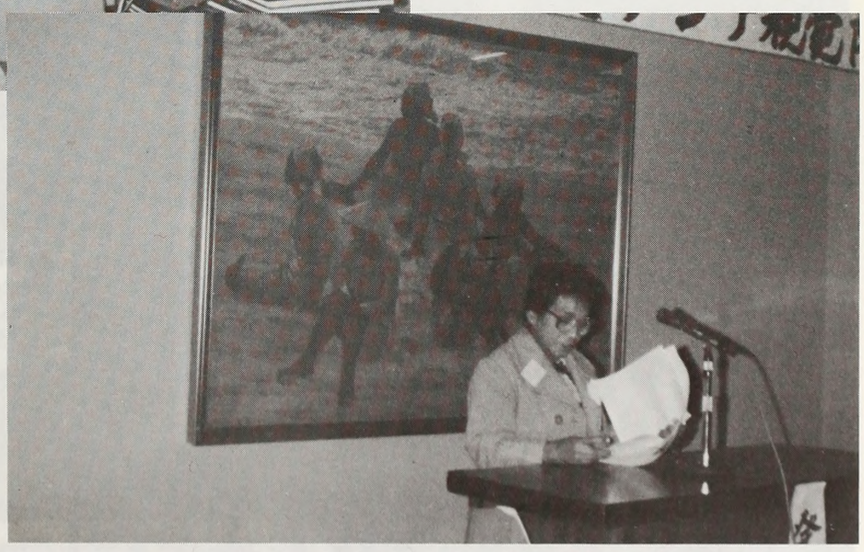
CONCLUSION

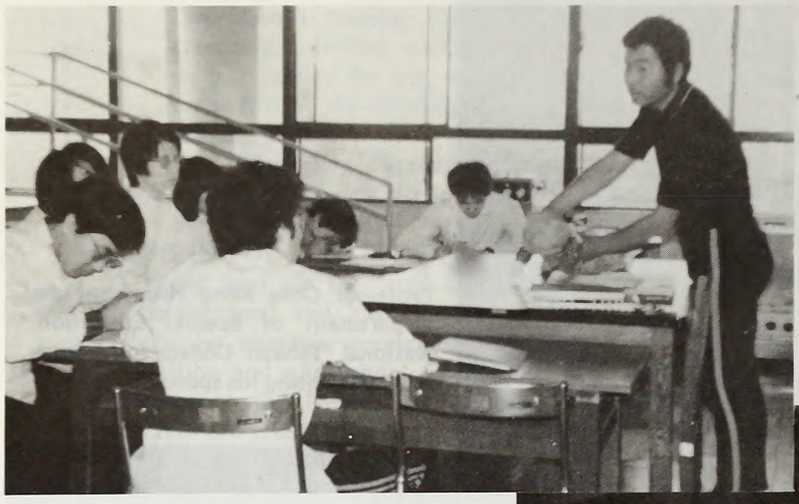
The writer has this to say, "It was a worthwhile experience. Within the short stay, I gained valuable knowledge, and inspite of the language barriers, I did benefit from the Conference".

◀ Professor Chee Ming Hsu from the Department of Special Education, National Taiwan College of Education, presenting his speech.

▶ Delegates to the Conference. Translator is to the far left.

▼ Mrs. N. Row delivering her talk.





◀
Students from the Osaka Prefectural School attending a physiotherapy class.

▲
The art of weaving.
Demonstration by a student from the Osaka Prefectural School for the Blind.

▲
A singing item by students from the Osaka Prefectural School for the Blind.

▲ Sightseeing at Nara.

◀ The Principal, Mrs. N. Row receiving low vision aids from a representative of the Osaka City Blind Association.

▶ Mrs. N. Row being presented with vouchers of gifts from a representative of the Osaka Prefectural Blind Association.

▲ Opening dinner/reception for all delegates. (Mrs. N. Row, second from left).

FORUM: TOWARDS A BETTER UNDERSTANDING BETWEEN THE ABLE-BODIED AND THE DISABLED (A REPORT)

The Braille and Talking Book Library of our Association held a forum at the Lee Kong Chian Hall, on the 26th of September, 1981. This forum was organised in conjunction with the International Year of Disabled Persons. Appropriately entitled 'Towards A Better Understanding Between the Able-Bodied and the Disabled', the forum attempted to clear the existing misconceptions and misconstrued attitudes between the able-bodied and the disabled.

Mr. Toh Ah Bot, Public Relations Secretary, Singapore Association for the Blind represented the visually handicapped. Dr. Ng Pui Eng, clinical psychologist, Singapore Association for Mental Health, and Miss Chai Ai Kim, teacher, Singapore Association for Retarded Children represented the mentally disabled. Representing the physically disabled was Mr. D'Rose, founder-member of the Handicap Welfare Association and Editor of the 'IYDP' magazine. Last but not least was Miss Guneswary Sinnatamby, a teacher at a government primary school and who has done much voluntary work with the visually and physically handicapped, who represented the able-bodied.

It is the general view that the present barriers handicapping the disabled towards full participation in society in the fields of employment, education and social integration stem from the fact that both these groups do not understand each other, at least from the attitudinal point of view. For instance, the able-bodied may think of a disabled person as someone who is unproductive, unintelligent and 'disability infectious'. All these may result in the disabled being isolated from society. In addition, the able-bodied tend to feel sympathetic for the disabled so much so that they tend to overprotect him. This results in the disabled person not being able to do things for himself (such as the daily skills of living) – thus rendering him a useless digit in society.

On the other hand, the disabled themselves too, have their faults which may just as much contribute to the attitudes of the able-bodied towards the disabled. For instance, the disabled person may have the attitude of a *total surrender* to his disability, thus thinking that since society is solely responsible for all their ills and handicaps, they have the right to demand any and every privilege from it, no matter whether they have worked for it.

Yet, another attitude may be that of self-pity, where the disabled person overpities himself, thereby giving the wrong impression to the able-bodied.

The right attitudes have to be mapped out. As a first step, it must be recognised that the disabled have a place in the world and are capable of making a contribution to it just as the able-bodied have. Secondly, it must be made unmistakably clear that the disabled are not different from others that they are not forever dejected and sorrowful and that the disabled are not suffering from the loss of their ability. The disabled are no more unhappy in their unfavourable environment than any other group of people would be, if confronted with an equally awkward situation.

No doubt, in this respect, the disabled also have a responsibility. All handicapped individuals must make their own adjustment to the attitudes of the able-bodied. An adjustment would mean 'knowing and accepting what one can and cannot do'. The basis for any such adjustment, as was agreed at the forum, is self-knowledge and self-confidence routed in feelings of security and a sense of belonging.

The Speakers presented aspects and criteria of the different types of handicap – physical, mental and sensory. The discussion focused on the plea of the disabled in society and the false notions held towards them. One of the speakers representing the visually handicapped related the 'myth' of the able-bodied towards the disabled in that the visually handicapped are described to have better senses than the able-bodied, thus elevating the handicapped to a 'superhuman' status.

The Speaker representing the mentally disabled further illustrated that 'inappropriate' attitude of the able-bodied towards the disabled is attributed to their (able-bodied) prejudice, ignorance, anxiety and frustration. Being mentally retarded is not a social disease according to another speaker representing the mentally disabled.

In the area of the physically handicapped, the Speaker indicated that the 'closed' minds of members of society at large towards the handicapped lies in the education system, turning a set of selfish people without a thought for others, without a social conscience and with the least thought of social responsibility. The Speaker advocated that the solution lies in a more liberal education which should be towards development of a social conscience and should be geared towards the notion of 'how to live' instead of 'how to make a living'.

The Speaker representing the able-bodied felt that the question rested on a lack of unity between the disabled and the able-bodied rather than that of attitude held by the disabled and able-bodied.

All these and many more aspects of the problem were frankly and honestly discussed and we do hope that those who attended would have left the forum richer in information about the disabled.

EDUCATIONAL TOUR
KUALA LUMPUR — CAMERON HIGHLANDS

The tour group, comprising of 18 children, 6 trainees and 9 staff members gathered at the School for the Blind on 21st November, 1981, Saturday at 7.30 a.m. A roll call was given and the group left the School at about 7.45 a.m. As the Oxley Tour coach rumbled down Toa Payoh Rise, Mr. Koh Poh Kwang, our tour leader distinctly said, "Pupils and trainees, respect the custom and culture of the people you are visiting." We were cleared at the immigration point at 10.45 a.m. without any trouble. Lunch was taken at 12.15 p.m. at Ayer Hitam (our first stop). We reached the state of Malacca at 3.15 p.m. and stopped at St. Paul's Church for some sight-seeing.

We proceeded to Kuala Lumpur and checked in the City Hotel at 8.50 p.m. After the unpacking and showers, a few hungry children and staff members went out for supper. We received curious stares and comments. The night was spent in a crammed room and my room-mates and I felt rather insecure as our windows could not be locked. Anyway, we were too tired to worry and sleep came easily.

The next morning, the group set out to visit a few interesting places in Kuala Lumpur. The first stop was at the National Monument. We had a fine time taking photographs and looking up the place. I am sure some of us felt a tinge of sadness as our thoughts go back to the lives taken and sacrificed during the World Wars. We then proceeded to the National Museum. The Museum was rather dim inside. The children experienced quite a thrill feeling the exhibits of old-fashioned carriages and historical figures and also the musical instruments on display. As usual, we were the centre of attraction. The third place we visited was the National Stadium which is an outdoor stadium. We could not see the interior as the place was locked.

After a quick lunch (at 1.00 p.m.) we set out for Cameron Highlands. We stopped by to see the Batu Caves. We were told that the Caves were discovered in 1891 and there are 272 steps leading to the entrance. The trainees and children were excited and the more energetic ones challenged their friends up the 272 steps. After the scramble, they came back tired and complained of muscle aches. It was a good experience for them.

On the way to Cameron Highlands, a student was taken ill and his friend volunteered to act as a 'pillow' while others gave him their jackets, cleaned him up after he vomitted and made a fuss over him. There was marvellous co-operation among everyone and this spirit was seen throughout the 4 days.

We reached Tanah Rata, Cameron Highlands at 6.35 p.m. just before sunset and were housed in a cottage-like hotel. Dinner was served 45 minutes later after which there was free activity. The time was spent playing indoor games, going out to the shops or holding conversations with the driver and tour guide. There was good interaction everywhere. Everyone was warmly dressed for the night.

The next morning was declared a free session. Various groups carried out their individual programmes. Some seized this good opportunity to take more pictures of the scenic places. Others shopped around the little town, while still others took short hikes to a waterfall.

After lunch, we set out to visit a Buddhist temple at Brinchang. There were several stalls selling fruits and vegetables outside the temple and some children and staff members were more interested in them. They expressed their excitement to see and touch the giant chillies, (a fruit which resembled a human hand) and others.

After the visit to the temple, we were brought to a 'marketplace'. There were many stalls selling fruits, vegetables, flowers, potted plants, and preserved butterflies. The children were busy comparing notes with each other and bargaining for the best prices.

After the 'marketplace', we proceeded to a vegetable farm. The children and trainees were not particularly interested and most of them stayed back in the coach.

We were back at the hotel at 3.45 p.m. Dinner was served at 6 o'clock. We spent the rest of the evening, talking and packing. In view of the fact that we have to be up very early the next day, the group retired to bed early that night.

On Tuesday morning, we left Tanah Rata at 6.30 a.m. and began the 15-hour ride home. The journey down was rather rough. We stopped to see a waterfall. Breakfast was served at Tapah some 2 hours later. The coach was rather noisy as some children were rather restless, chattering away; while others tried to catch up with some sleep.

Lunch was at Kuala Lumpur and the last stop was at Ayer Hitam for dinner. A few of us did some last minute shopping and the journey home continued. The last part of the homeward bound journey was memorable. The guide entertained us with Chinese songs and the children displayed their singing talents.

We arrived back at the School for the Blind at 9.15 p.m. on November 24, 1981 and everyone was glad to be home.

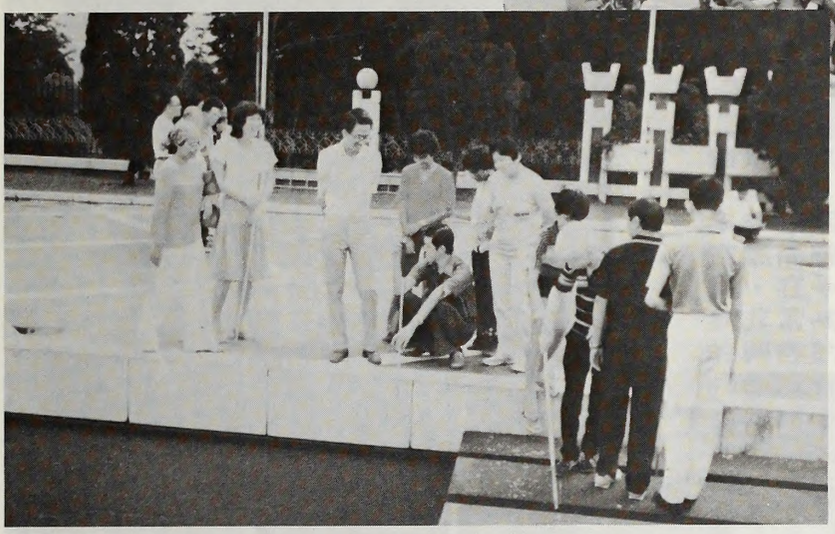
▶
The National Mosque at Kuala Lumpur.

▼
'How smart we look!' The National Monument at Kuala Lumpur.

▲ Batu Caves at Kuala Lumpur.

◀
Posing proudly outside the National Stadium at Kuala Lumpur.

▲
The Garden Hostel where the group stayed at Cameron Highlands.



▲
Sharing a joke. Taken at the National Monument at Kuala Lumpur.

▲
Taken outside a Buddhist Temple at Cameron Highlands. Some of the group members viewing the fruits and vegetables.

◀
Souvenirs sold at a side-stall at Tanah Rata, Cameron Highlands.

▲ Parliament House, Kuala Lumpur.

▲ On top of St. Paul's Hill, Malacca.

▼ Posing outside the 'Gateway to the East'.

▶
One of the scenic spots on the way to Cameron Highlands.

盲人與常人的對話

惠生

媽媽說：“可能是吃錯藥，也可能是在有身孕的時候去修補地板。”每當人家問媽媽我爲什麼會盲時，媽媽總是這樣回答。我也不知道媽媽給人家的解答有沒有醫學上的根據，無論如何，我是眞的瞎。

剛出世的時候我能看到一點點。二三歲時在鄰居的勸說下，我的眼睛給醫生動手術，但結果我並沒有找回失去的光明。

二三年的繽紛世界，在我腦海中並未留下什麼痕跡，現在我一點也不能回憶起幼年時見過的世界。雖然我約略知道白天和黑夜有什麼不同。

一口氣講述了上面的一段話，阿宏望着天花板。

“請您描述您腦海中的一棵樹，好嗎！”

“喔！我想不太容易。可能是很粗很高的，是不是？樹上有沒有分枝我不清楚。它的根是向什麼方向伸延的？”

“椰樹呢？”

“我想也是很直很高，100多呎吧！”

“竹呢？”

“嗯！這我摸過，直直滑滑的。”

“您對花的感受又如何？”

“沒什麼特別。我分辨不出美醜與顏色。”

“香味總對您有作用吧！”

“是的，茉莉與水梅的芬香，能使我覺得很清爽。”

“橙與蘋果，南瓜與香蕉您分辨得出嗎？”

“應該是沒有問題。“ ”

“請您告訴我人是什麼樣子的？”

“我可不大清楚，我知道雙眼，雙耳，一口，一鼻應在什麼位置，但是它們與身體構成怎麼樣的關係，我不大了解。”

“您的求學過程及工作如何？”

“我在盲童學校求學時沒碰到什麼困難，但是一到外邊的學校，就不太容易。高中畢業後，我在裕廊一間工廠當員工，一年多後因受不了那單調的環境及熱烘烘的空氣而離職。後來在盲人協會當點字指導員，在一九七七年起担任圖書館員。我感到非常高興，因爲我找到一份完全符合我的興趣的工作。”

“你有什麼嗜好？”

“我喜歡到處溜躂，到百貨市場及熱鬧的地方看。”

“您的太太也是盲的，爲什麼您作這樣的選擇？”

“俗語說：物以類聚，我們盲人的交遊圈子不大，另一方面，愛情是不能加以解釋的，愛的力量就是如此不可思議。據我估計新加坡大約有十對盲人夫婦。”

“日常生活遭到什麼困難嗎？”

“一般上沒有什麼不方便。”

“您的孩子對雙親都盲的態度怎樣？”

“很正常，他接受雙親都盲的事實。我不敢肯定他日後會不會自卑，不過，我盡量設法給他有機會和其他的盲人接觸，使他了解盲並不是一件可耻的事。”

“您的人生哲學是怎麼樣的？”

“我們毫不自憐亦不希望別人可憐！我們要的是人們表現出的愛心，常言道，心靜自然涼，我們找尋的是內心的寧靜！”

黑暗與光明

惠生

五年級年終考試就要到了，可是玉葉還是躺在醫院中。看來聖誕節與華人新年得在醫院過了。到醫院來看她的人越來越多，然而她却越來越不能看見東西了。外邊的日子一日比一日暗起來，而她的內心則是一片茫然。眞豈有此理，紅眼睛能使她成爲盲人。她不信，……但事實終究是事實。

一九六五年她來到了新加坡盲童學校。會在一間鄉村小學修完四年級的她，輕而易舉地完成了盲童學校的小學課程而進入依布拉欣中學就讀。

中四修畢，爲了自立，她接受一段時期的電話接線員的訓練，但最終她成爲一個點字打字員。

這幾年來，她和點字打字機朝夕相處，並和義務工作者時常相聚，使她有機會和外界的正常人士相接觸。正常人給她的印象是：

1．受英文教育者較開放，易於交往。
2．受華文教育者較保守，不易傾談，但多有一顆眞誠的愛心。

在路上碰到人時，聽到的是：“可憐！可惜！”　好在不是　“可悲！可怕！”

藍天，白雲，綠葉，紅花，多姿多彩的人生，這一切在她十二歲的時候就全消失了，自小就喜歡看街戲的她，在失明之後，往往佇立於街戲台前凝思。她再也看不到戲台上醜角滑稽的臉部表情，及演大花臉者誇張的面孔。回憶，也只有回憶才能追回這些失去的形象。據她說這是她失明後自覺的第一個冲擊。

十二年建立起來的彩色世界，經過多年的隔絕，她腦海中對顏色與立體形象的概念也日漸模糊了。粉紅色與紫色的混合到底在她腦海中形成了什麼樣的世界，我不能代言。她很想知道新加坡引以爲榮的組屋，到底是什麼樣子的。說給她聽後，她也不大了解。

多年來，行動上她多數能自己照顧自己，但碰撞到別人與東西仍然不能避免。撞到肌膚瘀黑是很平常的，盲人對精神上的痛苦的忍耐力是比我們常人强的。當然，我想肉體上的痛苦她也是比我們較能頂受。我還沒看過盲人因跌撞而哭泣，或許跌撞是他們默認的生活中必經的途徑，久而習以爲常。反過來，這一切的外來冲擊，對培養她堅强的格性不無幫助。跌倒算什麼？

夢想與願望

她喜歡“閱讀”中外文學作品。當然亦會夢想成爲作家。希望有朝一日，她的夢想會成爲事實，寫出一些扣人心絃的篇章。她也想嘗試成爲一個針灸與指壓按摩家。—這在日本是很平常的。她盼望有一天，新加坡也能引進這種技藝，使盲人有機會在另一疆場上奔馳。

世界是美好的。讓我們在此祝福她早日完成她的心願。

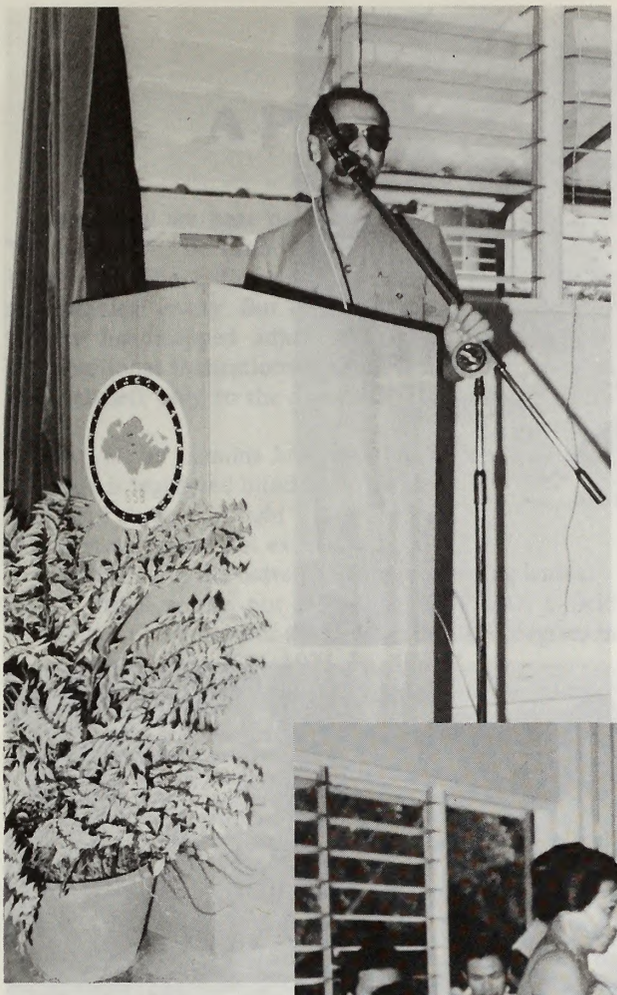
25TH ANNIVERSARY CELEBRATION

The School for the Blind celebrated its 25th Anniversary on November 28, 1981. It was a happy and proud occasion. Many who attended the function – former and present school students, teachers and principals all shared the happy occasion. The photographs below will tell the rest.

◀ Principal of the School for the Blind presenting her opening speech.

◀ Enjoying the deliciously prepared lunch.

▲
The 'big family' who attended the celebration.
▼



◀ President of the Singapore Association for the Blind, Mr. Ron Chandran Dudley presenting his speech.

▼ Mrs. P.E. Sabapathy, Matron at the Residential School for the Blind lighting the candles on the 25th Anniversary cake.

◀ Singing together in harmony.

▶ The present Principal, Mrs. N. Row and former Principals, Mr. Lee Teck Hock and Mrs. Elizabeth Choy cutting the 25th Anniversary cake.

◀ Blowing the candles on the cake.

VISUAL HANDICAP
A PSYCHOLOGICAL PERSPECTIVE

How often we hear people making remarks such as "he is blind", "he cannot see", or "he can only see a little", etc. The ordinary man will take visual handicap as a physical entity. But the question on how does the visually handicapped adjust to environmental barriers and emotional frustrations is often lost to the public at large but left only to the concern of professionals in the field.

First, let us examine how visual handicap is defined. A person is registered blind when he has:

(a) Total absence of sight
(b) or visual acuity not exceeding 6/60 or 20/200 in the better eye with correcting lenses,
(c) or visual acuity not exceeding 6/24 with a field defect of 10 degrees around fixation (20 degrees in diameter) (Lim K.H. 1975, Pg. 488)*[1]

A child is registered partially sighted for the purpose of schooling when he has:

(1) 6/24 vision or worse and/or
(2) Jaegger 8 (N 10) or worse (Lim K.H. 1975, Pg. 488)*[2]

The major causes of blindness in Singapore are malformation, congenital cataract, optic atrophy, congenital glaucoma, retinal detachment and diabetic retinopathy.

When an individual is blind due to congenital causes, a great part of the individual's social learning would be mastered through his tactile and auditory senses. When a person is visually handicapped due to an accident or physical deterioration of the optic nerves or central vision at a young age, part of his social learning would be through observation and imitation, prior to the onset of blindness. Individuals who are blind at an adult age would have seen objects, persons in the appropriate perspective and context.

Adjustment, physically and mentally would be experienced by all mentioned categories of individuals, but in varying amounts. During this period of adjustment, the individual may undergo emotional frustrations, inferiority complex, and feelings of inadequacy. If such psychological problems are not alleviated at an early stage, DEPRESSION sets in.

When an individual suffers from depression, he undergoes emotional, physical, behavioural and cognitive changes. Symptoms attached to emotional changes include sadness, guilt, anxiety, anger and mood variation. Physical changes may be experienced through sleep disorder, eating disorder, constipation, weight loss, weakness, easy fatigability and pain of unexplained origin. Behavioural changes such as crying, withdrawal, retardation and agitation may be experienced. Cognitive changes in the individual would lead to the individual holding a negative self-concept, negative view of the world and negative expectations for the future. The individual also imposes self-blame, self-criticism, indecisiveness, helplessness, hopelessness, worthlessness and delusions.

In the process of coping with and adjusting to the handicap STRESS is a major reaction experienced. What is stress? Physicians describe stress as the disturbance of the functioning of bodily mechanisms brought about by physical injury, disease, or changes in the physical environment such as extremes of heat, cold. Psychologists take a different standpoint to them. Stress arises when some events threaten or are perceived to threaten the individual because of the way they are interpreted. When an organism faces a threat (dangerous situation, handicap, etc.) to its well-being, it may try to escape, avoid or confront the threat. During such times, strong emotions are aroused to experience such emotions continously. The human mind can continue to function normally, but at the expense of the body as unreasonable demands may have been imposed upon it. This may result in the breakdown of biological functioning which is termed psychosomatic disorder. Psychosomatic manifestations may be in the form of peptic ulcers, blood pressure, asthmatic reactions, pernicious anemia, respiratory illness.

SUICIDAL tendencies are not uncommon among individuals adjusting to any form of physical handicap. It must be noted that not all people who commit suicide are depressed and many depressives do not commit suicide. However, the frequency of suicide is much greater among depressives than for any other psychiatric group.(Reiss et al. 1977)*[3]

There are many possible reasons why a person may commit suicide, and it is often difficult to specify the motivation for any particular case. However, one of the major reasons is escape from suffering. The individual's thoughts and intentions are related to hopelessness, and has no hope of solving major problems, and thus forsees a life of unending suffering. Secondary reasons may be that of retaliation against others in order to make them feel guilty for their death, and to gain attention.

This is not to say that all individuals inflicted with disabilities, whether mental or physical would undergo feelings of depression, stress, anxiety, or who are more likely to attempt suicide. Such behavioural attitudes are also common among individuals not inflicted with such disabilities.

The above is a brief, simple account of the possible effects of visual handicap on an individual especially when he or she is inflicted with it at a later stage of his/her life. For individuals born with the handicap, psychological adjustment to environmental barriers would be less traumatic.

It is our moral duty as members of the public especially those who are policy-makers to be able to understand constructively the needs and feelings of the visually handicapped or any disabled individuals so that we can facilitate their independence and aid towards development of their potentials.

*1,2 Lim K.H. (1975): 'Causes and Prevention of Blindness'. Paper presented at the Fifth Pan Pacific Conference of the International Society for the Rehabilitation of the Disabled. November 2-7, 1975.

* 3 S. Reiss, R.A. Peterson, L.D. Eron, M.M. Reiss, Abnormality: Experimental and Clinical Approach, 1977.

TANDEM CYCLING – WEST MALAYSIA

Tandem cycling has been introduced to encourage our visually handicapped persons to take it up as a form of outdoor activity.

A tandem cycling event up to West Malaysia was organised on 15th November, 1981. Training which included warming-up exercises, 5 rounds run and so forth commenced in March where 30 blind persons and 25 sighted volunteers participated.

Sometime in May, the team of 16 visually handicapped and 16 'pilot' cyclists was selected. Members of the team were selected based on their physical condition, interest, endurance and regular attendance.

Prior to the event to be held in W. Malaysia, a tandem cycling program was held in Singapore and was successfully completed.

Training continued on after the above event. Our cyclists were enthusiastic and interested in the West Malaysia event. As the days drew nearer to the month of November, all were anxious and very excited and even optimistic.

A second trip around Singapore was organised on 1st November, 1981 (130 km). In this trip we were provided with XL Energy drink sponsored by H.M. Colmar Pte. Ltd. From this second trip we could further improve our cyclists' techniques in handling the tandem machine.

Prior to the W. Malaysia event, a study on the routes to be taken was conducted in September by the O & M instructors and a volunteer led by Mr Raymond Chiam. Dangerous and narrow roads were marked out to be avoided on the trip proper.

Soon the day drew near for the cyclists to start their trip. The cyclists were flagged off by Mr Lim Hwee Seh at the Singapore Association for the Blind at 8.00 a.m.on 15th November, 1981. Six tandems with six volunteers as pilot cyclists and six blind persons took to the road.

We were delayed for a short while by a faulty chain on one of the bicycles. The Association's 2 vans were part of the team. One van led the team and the other followed from behind.

The first day went off well. The sun was really hot and everyone felt thirsty. By this stage, cyclists and cycles went even faster than the morning ride.

During the whole journey we came across a few steep hills. No one gave up and each tried their best to cycle up. Finally, at 3.00 p.m. we reached our hotel. All of us felt very happy after having completed our first day journey.

When they were given the room keys, everyone immediately rushed for the shower.

Dinner was at 6.00 p.m. and everyone ate more than their usual amount.

On the second day, we woke up at 5.00 a.m. and prepared for the day. Breakfast was at 6.00 a.m. At 7.00 a.m. we were flagged off to our next destination. The journey was easily handled this time as most had already experienced the terrain on the first day. The second day went by with less noise as it was the shortest route. The third day it was about the same.

After the third day, the route was from Malacca to Kuala Lumpur (K.L.), the longest and toughest route of 91 miles. We started off as early as 5.30 a.m. During the journey we experienced breakdowns of a few bicycles. When we reached K.L. Territory, we were welcomed by the Malaysian counterparts; and the rain! It was the first heavy downpour during the trip. We were escorted into K.L. Town by two mobile squads. When we reached the hotel we were welcomed by our Malaysian counterparts from the Society of the Blind in West Malaysia.

Next morning we prepared to proceed to another destination. That morning the Malaysian newspapers interviewed the cyclists and took their comments and photographs. After the photographs were taken, we continued our journey to the next destination.

We took off from K.L. to Tg. Malim with determination to complete the whole journey successfully. At Tg. Malim that night we did not sleep well as it was warm and the hotel had no air-conditioning, so most sat up and chatted. Next morning, all were very sleepy and restless as they did not have enough sleep the night before. But they eagerly cycled their way to Ipoh. At the last half of the journey, we were escorted by the Ipoh Mobile Squad to the Winner Hotel. Now, the cyclists were very enthusiastic and looking forward to the next destination.

Next morning, we proceeded to Taiping. We encountered numerous hills and narrow roads and these made the journey very interesting and exciting. Soon we reached the Mikado Hotel. People there had been waiting since 2 p.m. for our cycling team. When we passed them they cheered and made remarks such as "fantastic".

Next morning our last destination was towards Penang. As usual, the cyclists enjoyed themselves and relaxed at Nibong Tebal, one of the small towns. An accident occurred that day. One of the bicycles was knocked down by a bus and we were held back for about two hours. After everything had been settled we continued on to the required destination.

We reached George Town and transported the bicycles and cyclists to Penang. There,we were welcomed by some cyclists from Penang. They organised a tea party for us.

Next morning, we visited certain places on our bicycles.

That evening, the cyclists were given a dinner organised by the Penang cyclists.

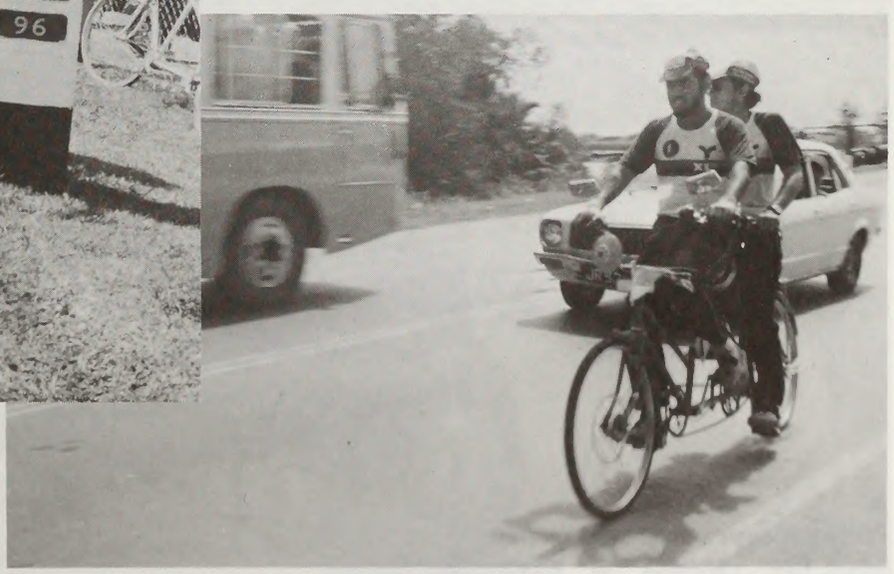
The cycling trip ended, but all the participants enjoyed themselves and gained valuable experiences.

THE TANDEM AFFAIR

◀ Flag off by Mr . Lim Hwee Seh, Executive Director, S.A.B. at 8.30 a.m. on 15 Nov. 1981.

Resting time, 96 km from Kuala Lumpur. ▼

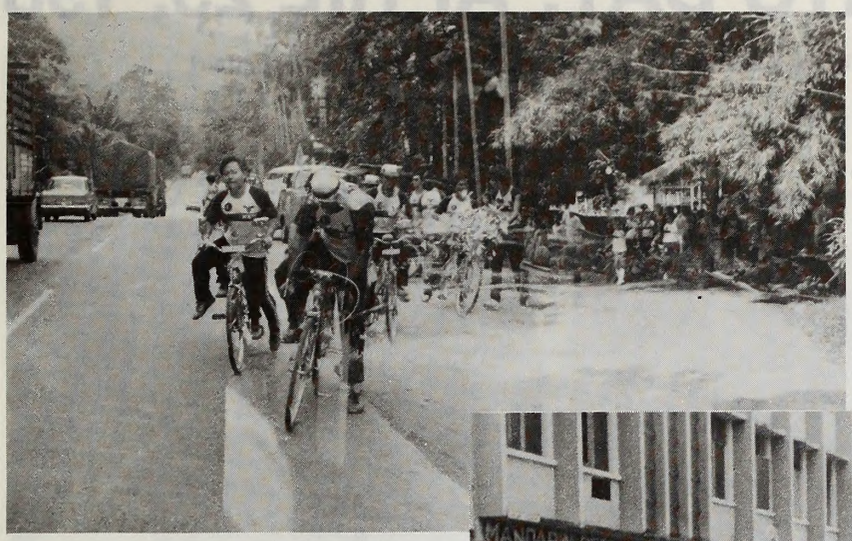
▼ Mr. Tahir, O & M Instructor, and blind – Mr. Shaffee on the way to Batu Pahat from Pontian.



◄
Police escort from Pontian to Batu Pahat.

▲
Merrily they go to Batu Pahat from Pontian.

►
Passing through a small town on the way from Malacca to Kuala Lumpur.



▲
The group taking a rest between the highway from Malacca to Kuala Lumpur.

▶
About to go off from Ipoh to Taiping under police escort.

▲
O & M Instructors distributing drinks to cyclists on the way to Tg. Malim from Kuala Lumpur.

▶
Giving a speech of thanks during a farewell dinner in Penang, after completing the tandem cycling trip from Singapore to Penang.

S.A.B.'s SPORTS DAY, APRIL 25, 1981

Young and old participated in the Association's Sports Day. It was indeed a family affair!

▲ A lion dance sparked off the events.

◄ Dressing up to win!

▲ 'Fitting in the pieces' race.

▲ 'Come on, you can make it! (Balancing race)

◀ Sawing their way through.

Our Guest of Honour, Mrs. Elizabeth Choy, (far right) a former Principal of the School for the Blind with members of the Executive Committee.

Executive Director, Mr. Lim Hwee Seh giving away the prizes.

Striding towards the winning post.

The shy prize-winner.

Message

My name is Yutaka Shioi.
I was born and grow up in Yokohama. Now I'm working in Yokohama City office citizen division.
In a holidays I enjoy swimming and camping with disabled persons.
I'm very pleasure to visit your country. I want to learn the history and the background of your country, also I want to find out more about the people in this chance.
When I come back to Japan I hope I make many friends and friendly each other.

Dear Friends:

Good morning/afternoon, ladies and gentlemen.

My name is Mari Kanazawa. I am from Japan and I work at the Tokyo Welfare Association of the Blind. My job involves several responsibilities. I teach individuals with visual disabilities to read Braille. In addition, I teach them how to type Japanese characters (kana). I also make cassette tapes of a newsletter called **Minna no Tokyo**, and these tapes are circulated by mail to the visually handicapped.

The Tokyo Welfare Association of the Blind is a place where the visually handicapped gather for educational and social programs. We carry out various educational programs and produce books in Braille. Our social activities include short trips and hiking. My work keeps me very busy, but in my free time I enjoy going out with friends, teaching Braille to others, and listening to music.

My hobbies include travelling, playing musical instruments, and swimming. My family consists of my father, mother, and elder married sister. I live with my parents because I am still not married. I am looking for someone! I, too, am visually handicapped and am losing my eyesight. Nevertheless, I appreciate the autumn leaves and frequently travel outside of Tokyo to enjoy the beautiful autumn sights.

If any of you have an opportunity to visit Japan, I will be more than willing to show you my country, especially the beauty of Japanese nature. I am certain that we will share a similar enjoyment and appreciation of nature.

(Ms.) Mari Kanazawa
15-2, Akazutsumi 2-chome
Setagaya-ku, Tokyo 156
Japan

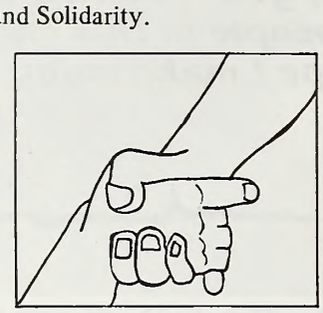
What is Behcet's disease?

Behcet's disease is a chronic systemic disease which increased in these 20 years, of which cause is now still unknown, but it is stated as non-infectionable. One of the causes is, it is said by many scholars, environmental pollution.

Many young people in 20-30 years old were attacked with this disease and got injured in their eyes, oral soft tissue and skin. I got impairment only in my eyesight.

Many patients of this disease in Japan organized a patients association to help and encourage each together in 1970. I am also a member of the association Osaka branch. The purpose of the association is to establish the complete welfare and medical care for all patients.

For the Friendship and Solidarity.



Dear Friends,

How do you do? In the beginning year of I.Y.D.P., I came from Japan to learn from the people in South East Asia. It is said that more than 450 million disabled persons live in the world. In addition, many of them are sacrificed by the war. It is our duty to make peaceful world so that disabled would not be increased any more.

Hideko Ohno

My Profile

Counselor in a public office
1-17, Takadono-cho,
Higashi-Osaka city,
579 JAPAN

29 years old
unmarried

birth date
25th, August 1952

I had been working in a local governmental office until 6 years ago when I was attacked with Behcet's disease. After my eyesight was failing on account of the disease, I underwent a rehabilitation at the Light House (a rehabilitation center for the blind) during temporary retirement for 2 years. I met many blind people knitting and/or working as telephone operators at the Light House. I was taught by them that the handicap is not caused from the disability, but it comes about from the fact that there is no opportunity for disabled persons to make the best use of their ability.

Now, I am working as a counselor in the same office where I have been working before, using spectacles, contact lenses and magnifying glass. I wish many occupations would be opened for the blind.

This paper serves to introduce Mr. Yoshihiro Murata, a Japanese national who is 21 years old and is sitting on the wheelchair ever since he was six years old. He is paralyzed from the waist down due to backbone trouble.

His work is mainly making various artificial flowers that match the 4 seasons by dyeing the cloth to get various shades. He is bringing along a brooch from his production.

He is of the opinion that there are many difficulties in securing employment here in Japan since only a few limited positions are open to disabled people. Therefore, we would be most grateful if you could furnish him with information concerning working conditions and the circumstances of the disabled persons in your country. He is very interested to learn your idea and opinion of what shall be done to improve the disabled persons and their surroundings.

Thanking you for your kind assistance, we remain .

Application for Overseas Dispatch of International Year of Disabled People

I should be grateful if you could consider my application to join the International Year of Disabled People as a dispatch traveller for the disabled people where I can have the opportunity to see about the living conditions of the disabled people and the facilities.

I will be 22 years old this year. I am paralyzed from the waist down. I suffered belly ache when I was four years old. The disease hit me so much that it caused damage to my backbone and could not walk with my own two feet.

When I reached the age of attending school, I couldn't join the public schools like ordinary children. I had to leave my home and join the group member, so-called Ohtema Rehabilitation Institute where only disabled children are educated. I spent nine long years in that institute.

Making a big challenge in order to attain my dreams, I wanted to join ordinary high schools like everyone does. My years in high school was crucial. I had a hard time learning mathematics and English since I received mostly physical training at the rehabilitation institute. The worst of all was the way to school. Since I had never had the actual experience in crossing the street where traffic lights give direction, I did not know when the time the pedestrians have to walk. Since the school was located quite far away, I had to ride a train. Railway stations have long and steep staircases. I could neither ascend nor descend. The kind-hearted conductors always carried me with my wheelchair up and down the staircase for four long years.

After my graduation, I had a hard time finding employment. I could only get short-term side jobs. I entered hospital twice during that time, since I suffered from inflammation of hip bone due to continuous sitting.

Presently, I am working at a factory specially made for the disabled people. I would like to mention here that there is no difference in the heart of men whether they are disabled or normal, i.e. our vitality to work and to improve ourselves.

Regarding our daily lives as disabled persons, one would like to say that it is very difficult especially since our country is hilly by nature and there are many narrow slopes where we need somebody's help to push our wheelchairs.

If I am chosen to be a dispatch traveller for the disabled people, I would like to discuss with my foreign disabled friends who have experienced the same hardships as I do how to make our life more comfortable by exchanging information and to be able to obtain understanding by the normal healthy people.

Y. Murata

YOSHIHIRO MURATA

East Osaka planning and co-operationing association which asks full participation coping with International year of disabled people.

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HIGASHI-OSAKA, OSAKA, JAPAN
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ACKNOWLEDGEMENT

The Committee would like to extend its appreciation to Mr. Ron Chandran Dudley for his 'Forward' to this magazine.

All those who so graciously contributed articles to this magazine.

All those who have helped in some way to make this magazine possible.

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新加坡盲人協會
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The Hon Mr C V Devan Nair

VICE-PATRONS The Hon Mr P Selvadurai
The Hon Mr Yeo Tiam Sie

To: The Executive Director
Singapore Association for the Blind
47 Toa Payoh Rise
Singapore 1129

MEMBERSHIP

I wish to become a Life Member/an Ordinary Member of the Singapore Association for the Blind and I enclose cheque/Mo for the sum of S$ _____.

(1) Annual Subscription ($5) ..... $ _____

(2) Life Membership ($100) ..... $ _____

(3) Donation (Income Tax deductible) ..... $ _____

My particulars are as follows:-

NAME: _____

NRIC NO: _____ DATE OF BIRTH: _____

OCCUPATION: _____ ADDRESS: _____

_____

OFFICE TEL: _____ HOME TEL: _____

DATE: _____ SIGNATURE: _____

* Proposed by: _____	Seconded by: _____
Signature: _____	Signature: _____

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APPROVED/ DISAPPROVED by Ex-Co Meeting of _____

* Item 4(i) of the S. A. B. Constitution & Rules:-

Membership shall be opened to all persons over the age of sixteen years who signify their general agreement with the objects of the Association provided that they are duly proposed and seconded by two Ordinary Members of the Association and approved by the Executive Committee or a Committee appointed for this purpose by the Executive Committee.

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the white cane

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சிங்கப்பூர் பார்வையற்றோர் சங்கம்

& Best Wishes

for a Happy New Year!

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Singapore Association For The Blind

"A Start To A Meaningful Life For Many"

PATRON
His Excellency The President of the Republic of Singapore
The Hon Mr C V Devan Nair

VICE-PATRONS
The Hon Mr P Selvadurai
The Hon Mr Yeo Tiam Siew

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Miss Betty Seow

EDITORIAL

Once again, we've come to the final issue in this third edition of "The White Cane" magazine.

Ever since its first edition in 1979, "The White Cane" has gone through a number of changes — both in its editorial staff as well as its frequency of publication. As to the latter, it will once more be put to another change, for as from 1984, its frequency of publication will be reduced from four to one issue per year. It is the hope of the Editorial Board that this reduction would also mean that resources and materials could be more efficiently used to improve and upgrade the quality of future issues.

As to the format of the magazine, it will cease to function as an internal circular for staff members of the Association. Rather, the "Vision" (the former news circular for the staff members) will be revived. "The White Cane" will continue to serve the public at large.

The Editorial Board will continue its policy of publishing articles in areas pertaining to the visually handicapped as well as the people involved with them. Further, the Editorial Board is aware of the need for the articles published to be simple, informative and varied. This is of vital importance as "The White Cane" is intended to reach a wide readership.

One of the ultimate aims of "The White Cane" is to provide a communication link between the general public and the visually handicapped. Any suggestions, comments, or even questions about the visually handicapped will be greatly appreciated. It must also be stressed here that when asking questions about the visually handicapped, there is no need to feel "bad" or "shy", for the visually handicapped know you mean well. Your contributions will be attended to in good faith.

Finally, this editorial will not be complete without a word of thanks to all members of the Editorial Board. All your efforts and the precious time given by you in making this magazine possible is highly commendable. It is hoped that you will continue giving your best when "The White Cane" magazine makes its appearance in its fourth year of publication next year.

Let me (early though it may be) take this opportunity to wish one and all "A Merry Christmas And A Happy And Prosperous 1984" when "The White Cane" magazine will, I hope, take on a new look.

WHAT IS NEWS IN S.A.B.?

STAFF RESHUFFLE

As of August 1983, there were a number of changes to the staff position at the management level. These are:

1. Miss Audrey Wong, formerly Administrative Assistant (Low Vision Clinic) now assumes the post of Administrative Assistant to the Executive Director and Assistant Director (Administration).

2. Mrs. P.E. Sabapathy will assume the duties of Miss Audrey Wong as Administrative Assistant (Low Vision Clinic) in addition to her duties as Head of the Residential Unit.

3. Mr. Koh Poh Kwang, a teacher of the School for the Blind, now assumes the post of Acting Assistant Director (Public Relations and Appeals).

4. Mr. M. Joseph is now Research, Records and Typing Clerk.

REGRETS

We regret to say that Mr. Winston Tan, Assistant Director (Public Relations and Appeals) has left the service of the Association on 31st August 1983. We wish him every success in his endeavours.

S.A.B. EXCLUDED FROM THE COMMUNITY CHEST

We regret to report that the S.A.B. has not been successful in its application to join the C.C.S. as a member though the Association's Executive Committee had agreed in principle to join the Chest. However, it was felt that we could apply to join them next year as the Chest was not confident in meeting our annual expenses of nearly 1.3 million dollars per year. In any case, it would mean a tough struggle to have to compete with the Big Giant —·the C.C.S. for funds.

ASIAN CONFERENCE 1983: AN OVERVIEW

The Singapore Association for the Blind will be hosting an Asian Conference on Visually Handicapped from 4 - 9 December 1983. It will host this in conjunction with the two sponsoring world organisations, the International Federation of the Blind and the World Council for the Welfare of the Blind.

Running simultaneously and three days beyond, the Association for the Blind will be also involved in supporting a Leadership Training Programme of visually handicapped people. This would be funded by:

SWEDISH HANDICAP INTERNATIONAL AID (SHIA)

This is the first time in the history of the Association that it will be involved in a programme of such magnitude serving two major functions simultaneously.

On previous occasions, countries like Japan, Malaysia, Philippines, Bombay and Hong Kong have hosted conferences organised by the Asian Affairs Committee of the World Council for the Welfare of the Blind. This time, however, the Asian Affairs Committee of the World Council for the Welfare of the Blind is joining forces with the East Asia Committee of the International Federation of the Blind to sponsor this momentous conference. The Singapore Association for the Blind is proud to be the host of such an event. The Association's philosophy has been to join the organisations of and for visually handicapped people where the majority shall be visually handicapped people who will be totally responsible for determining their own destiny. They will of course call upon their non-visually handicapped friends and colleagues to support and assist them to achieve their objectives. It is estimated that a minimum of two representatives per country from the Asia Pacific Region will attend. There are approximately forty countries in this region.

Our Organising Committee is a young one, majority of whom are visually handicapped people with the staff members and friends of the Singapore Association for the Blind helping the Committee with its work.

The programmes are drawn up so as to capture the interest, imagination and creativity of all participants. Their presentations and deliberations will manifest itself into resolutions and recommendations which when adopted and ratified will go towards improving the lives of visually handicapped people not only in the region but all over the developing and industrialised worlds.

World Presidents of the two organisations as well as their Secretaries — General, the respective Regional Chairpersons and other distinguished members of Various international non-governmental organisations and United Nations agencies will also be present. I hope that all visually handicapped members, friends and members of staff of our Association will not only be of assistance to our international visitors but will also demonstrate our warm hospitality and courtesy.

TEACHERS' DAY CELEBRATION ON THE S.A.B. CAMPUS

"A small school but a closely-knit community of parents, teachers and pupils."

Once again teachers must have felt an inner glow of satisfaction for a job well-done as they received tribute from different sections of our society for their dedicated service. Teachers' Day on 1st September 1983 was a school-holiday and so schools celebrated it on 31st August 1983 in their own way. In most schools the pupils entertained the teachers and other staff to songs, dances or comic sketches. In one school the guest of honour was none other than the school-servant. Thus, the teachers showed the right spirit in sharing the gratitude of the community with all others who also contribute albeit indirectly towards the welfare of our school children.

In the School for the Blind we do not have as many teachers or pupils as other schools. However, we rose to the occasion to celebrate the day with the same spirit of goodwill. We opened our hearts to all and sundry on the campus when we realized that there is no perimeter fence dividing the odd units of 47, 49 and 51 in Toa Payoh Rise; all are equally involved in the education, care and welfare of the students here.

The pupils began the day by writing greeting cards and delivering them personally to the staff. Many a child discovered creative talent in illustrating his or her own greeting card. At 10.30 a.m. the children, staff and a number of parents gathered in the school hall and three senior pupils from Primary Six took over the stage-management. Our visually handicapped children did no show any lack of talent for music, drama or dance as they performed on the stage. In the last item of their entertainment programme they involved the "audience" in active participation with various games. The teachers, the instructors, the child-care staff, the parents and others had an exciting time, in keeping with our motto "Perseverance, Achievement & Togetherness" standing out boldly on the backstage.

Finally came the five kilogram-cake, and our Executive Director had his turn to have some fun in cutting the cake. It was such a king-size cake that several teachers had to assist in dividing

it. Even with more than one helping, the teachers and parents could not finish it.

From 12.30 p.m. the teachers organised a modest packed-lunch treat. The guests came from all directions of the campus and they included parents as well. The school hall proved to be too small for all of them and many had to spread out over the grounds and there was an unscheduled pool-side party as well. Those who managed to find a place in the hall were once again discussing earnestly the Prime Minister's speech on the last National Day Rally.

By one o'clock the senior management staff, the clerks, the office attendants, the gardeners, the instructors and others returned to their duties full of thanks for the teachers who had answered the call to make it a special Teachers' Day.

"The feeling of togetherness amongst the teachers, administrators and child-care staff as they sit together for their lunch-break."

"Our Executive Director, Mr. Patrick Sim cuts the Teachers' Day cake presented by the pupils."

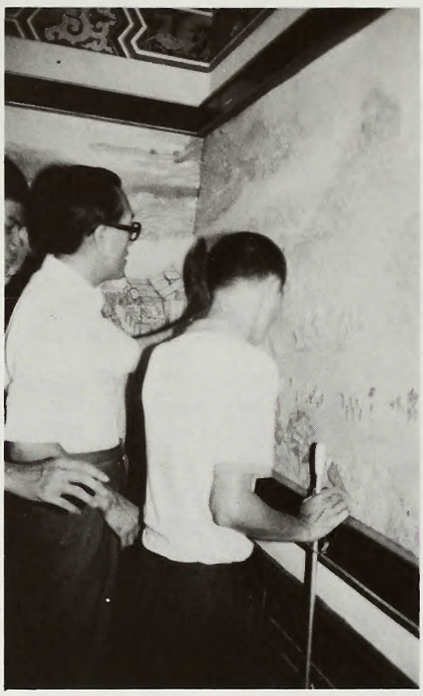
A VISIT TO THE MING VILLAGE

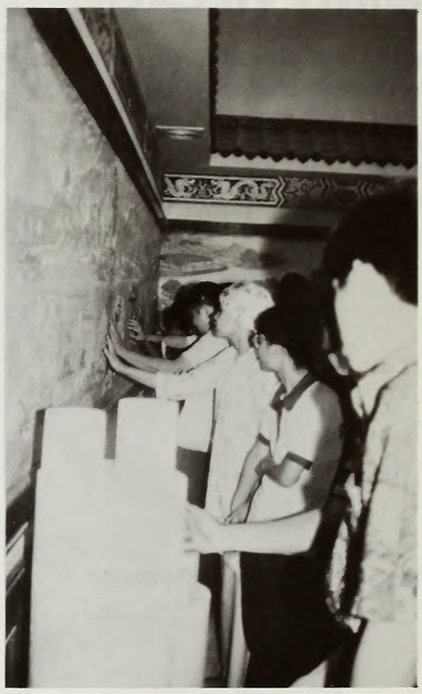
"As the pots pass through the makers' hands."

"The painting of intricate designs."

"Hmm, they look beautiful."

"Ah, I can see the trees up there!"





"Mural, mural on the wall, which is the most beautiful of them all?"

"This pot is of good quality."

"Mm, this marble stool is real cool."

TO CROSS OR NOT TO CROSS?

While travelling along our busy roads, have you ever come across traffic junctions that emit sounds resembling that of bird calls? For those who have, you may be wondering to yourselves as to why these traffic junctions emit such sounds.

Well, this is but one of the measures that is being taken to make "blind travel" on our roads more safe for the visually handicapped. Like their seeing counterparts, visually handicapped persons travel a great deal nowadays — they travel to and back from work, to shops, to places of interests and — practically almost anywhere and everywhere their feet may bring them. Often, they meet with problems, especially when trying to cross at traffic light junctions.

"I want to cross the road, please lend me your elbow."

"Thank you for helping me."

This is a dilemma which the visually handicapped face each time they attempt to cross a busy road at traffic light junctions.

It is with this problem in mind that the Public Works Department, in close collaboration with those involved with the visually handicapped, decided to do something that will make "blind travel" on our roads safer — thus, traffic lights with a difference.

The one mentioned at the outset of this article is known as the Audio Alarm Traffic Light. This alarm, which bleeps like a bird's call, will sound when it is safe to cross; and when no sound is heard, it would mean that it is not safe to cross. This device has been installed in several places throughout our Republic — there are about 71 such units. The average cost, according to the Public Work Department, is about S$300/- per unit. But, this system has its defects, one of which is that it does not help the visually handicapped person to locate where the traffic light is situated.

There is yet another device that has been developed in Australia called the Audio-Tactile Traffic Signal. This device will enable the visually handicapped to locate where the traffic light is, thus making it possible for him to operate the lights with ease.

"Moving towards the Audio-Tactile Signal."

"Ha, located the push-button of the traffic light."

"Ready to cross."

"I made it on my own!"

The use of Audio-Tactile Traffic Signal is presently on trial in Singapore; and you may find it at Lorong 1, Toa Payoh. This system has been found to be very successful in Australia.

This unit emits an audible and broken tone whose volume varies directly as the background traffic noise level and whose sound and pulse rate aids pedestrians in determining whether it is safe or not to cross the road.

The device emits a "click, click" sound — just like a blind person tapping his white cane at a show pulse rate for "Don't cross", and a tapping sound at a fast pulse rate for "Cross". It also indicates when the lights are flickering — the sound being a series of disjointed tappings at a fast pulse rate.

The device is also constructed with a tactile dimension. By placing a hand on the front panel of the push-button assembly, one can feel the impact of the pulses which one is able to hear. Thus, this unit is also very helpful to those whose hearing is not up to par and therefore need an extra cue to aid their safe travel.

Thus far, this system has proved to be the right kind of traffic light system popular with the visually handicapped persons here in Singapore. One visually handicapped pedestrian comments that, "That system is superb; it not only helps me to locate where the traffic light is, but also tells me whether to cross or not to cross, without which, I would have to depend on passers-by."

It is hoped that the Public Works Department will put up more of such systems rather than the Audio Alarm system. This will help make travelling safer for the visually handicapped.

LITTLE BIG THOTS

Forget yourself for others, and others will never forget you.

How empty is the life that's filled only with things.

Humility is a strange thing — when you think you've gained it, you've lost it.

A loose tongue often gets its owner into a tight place.

PEPPER AND SPICE AND ALL THINGS NICE

What's cooking?

"French Toast" for morning tea!

This is just another of the cookery classes that was started in March 1983 for the Industrial Training Centre's trainees under the experienced "ladleship" of Mrs. Row, a teacher of the School for the Blind.

Her students are divided into three groups of twos including a group of two male trainees.

Firstly, the students are given an orientation on the set-up of the kitchen. They are taught how the stove works, the names of utensils to be used, the different uses of knives, etc. Having a practical knowledge on how a stove works is important — feeling where the jets of gas will be emitting from, where to place the ignitor, how and when to turn the gas supply and ignite the oven.

The other basic skills being taught are how to handle knives, spoons and ladles, dishing out cooked food, slicing onions, cutting vegetables, meat, etc.

"All the students enjoyed the sessions very much and looked forward to the next one. As far as possible, cleanliness is stressed in whatever they do," concluded Mrs. Row.

What's the difference?

What is your reaction (as a sighted person) to an invitation from a blind couple for a steam-boat party with other visually handicapped friends? Sounds exciting!

"We have our ways of doing things safely — using an electric steamboat and satay sticks. It's really fun as my blind guests can actually put their fingers on raw chicken, pork, prawns, cuttlefish or liver," commented the partially blind hostess who did all the preparation for the feast.

"Most parents of blind children do not allow them to learn to cook at home and I really have to start from scratch when I got married," commented a partially blind lady.

"My first marketing trip was rather frightening," she recounted, "as things were placed all over the floor and the atmosphere sounded very choatic but I still have to grope my way to the different stalls. I'll call out to them and if they do respond (though some just keep quiet), I'll then enquire what they

"Mrs. Row giving instruction on the finer points of cooking."

are selling. I will frequent those responsive and honest stallholders and avoid those who gave me rotten vegetables."

"A friend gave me a few practical lessons on cooking before my marriage and the rest depended on my initiative to try out new dishes. When I do encounter any practical problem in cooking a particular vegetable or dish — giving mum a call is the answer. The first time I bought some dried mushrooms — strange, it's so hard — never eaten such hard ones — how to cook them? Fortunately, mum and friends are ever ready to come to my rescue."

"There are no special utensils in my kitchen except a timer that has embossed markings and the rest are an ordinary electric rice cooker, blender, broiler, etc. We have to choose scrapers or can-openers that are less dangerous to use as there are many designs available in the market."

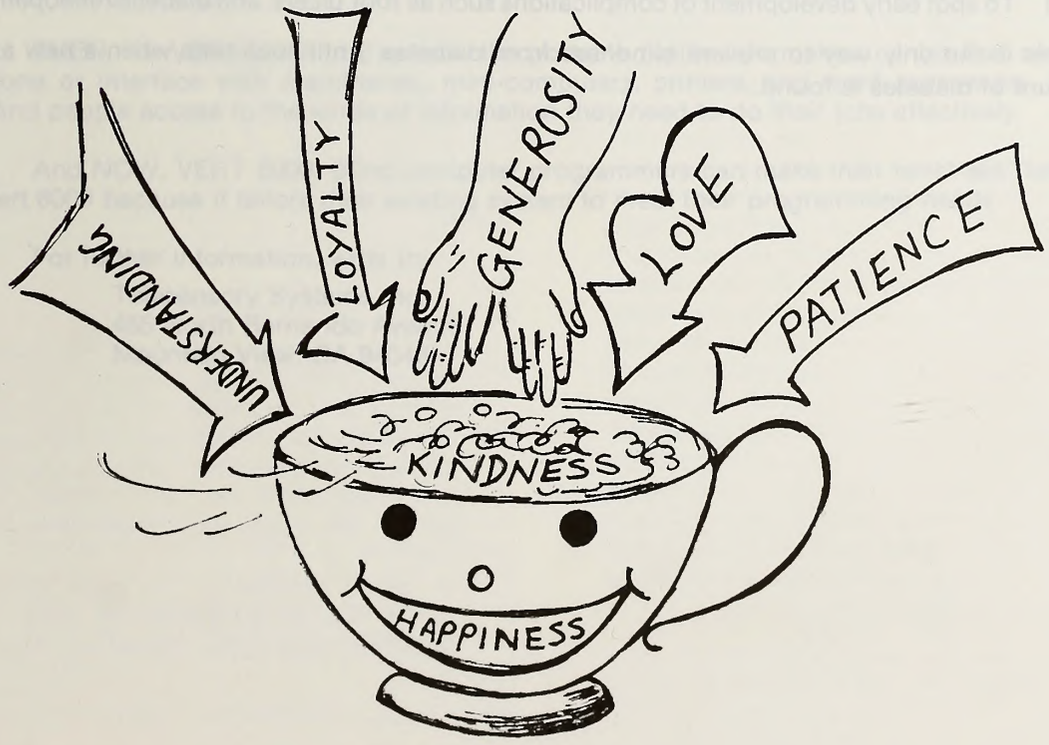
"We depended on the whistle of the kettle as an indicator that the water is about to boil. How much of sauce or salt to add or how to chop up a whole chicken will need some good estimation."

"I was rather afraid of the sound of splattering oil and I'm sure some sighted persons use a cover to shield themselves from the oil as I did. But now, I'll turn off the fire first to avoid the splattering oil and to turn the fish over."

Blind persons have their way of doing things and unless given the opportunity and no over-protection or hindrance by sighted persons, you'll never know what they can really cook up — stewed beef, nasi lemak, rendang chicken, corn custard, etc. — to delight the palates of their family and friends.

HAPPINESS SPREAD

2 heaping cups of patience
1 heart full of love
2 handfuls of generosity
Add a dash of laughter, a full cup
of understanding and 2 cups of loyalty.
Mix well and sprinkle with kindness.
Spread this irresistible delicacy over a
lifetime and serve eveyone you meet.



DIABETES AND BLINDNESS

by Dr. C.Y. Khoo

There is an increasing number of people becoming blind from diabetes because of the following reasons:

(1) An increasing number of diabetics.
(2) The longer life expectancy of diabetics.

Diabetes is a disease in which the body is unable to utilize the sugar consumed. This is because of a lack of secretion of a hormone called insulin. The sugar then saturates the blood (hyperglycaemia) and is passed out in the urine (glycosuria). Hyperglycaemia damages human tissues, including the legs, kidneys and eyes. Many diabetics do not realize this, because the damage done is gradual. By the time the legs become gangerous, or the eyes blind, it is usually too late for treatment. It is vitally important for diabetics to control their blood sugar daily by taking tablets or injections so that such complications do not arise.

Blindness in diabetes results from diabetic retinopathy which causes vitreous haemorrhage, retinal detachment and diabetic maculopathy. A young diabetic (below 30 years of age) tends to develop retinopathy more quickly than an elderly diabetic. Diabetes of late onset (45 years and above) is usually milder, and would take from 10 to 15 years to develop retinopathy.

Recent studies have shown that laser photocoagulation can help prevent the progress of diabetic retinopathy. This of course does not help replace good metabolic control of the diabetes, which is still the most important aspect of the treatment of diabetics. As not all will become blind, not every diabetic will require photocoagulation. However, where the retinopathy is progressive or proliferative, it is important to have early photocoagulation. Unfortunately many patients do not seek treatment until vision is impaired.

The message is clear — diabetics should have regular medical check-ups for two important reasons:

(1) To achieve optimum control of blood-sugar.
(2) To spot early development of complications such as foot ulcers, and diabetic retinopathy.

This is the only way to prevent blindness from diabetes, until such time when a new and total cure of diabetes is found.

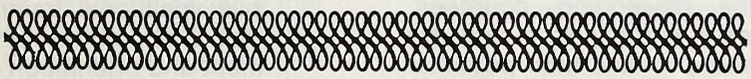
AMERICA

A California technological firm has come up with a solution, according to a recent New York Times article. National Semi-conductor of Santa Clara, Calif. has created Positalker, a synthesised voice box that attaches to computerised scanning cash registers. As each item is scanned, the unit quotes the price with a pleasantly anonymous tape-recorded female voice, which also announces the total and change due the customer.

The unit can be found in 42 supermarkets nationwide, so far. The Grand Union chain is testing the device to see if it warrants installation in some of its 750 stores, most of which are located on the Eastern Seaboard.

An original version of 10" x 6" unit used a male voice, but customers at a San Jose, Calif. test told National Semiconductor that the voice was too harsh and that they would prefer a female voice. Customer and supermarket employee response to the unit has generally been positive. Micro chip replacements allow it to speak in French, Spanish and German, opening Canadian and European markets to POSitalker.

(Extract from FOCUS February, 1983 Vol 17, No. 1)



FIRST came the OPTACON reading system: 9,000 Optacons have given blind users access to printed materials whenever they need it — worldwide. And after all these years, the Optacon is still going strong.

THEN, the VERSABRAILLE system, the portable braille information center that can stand alone or interface with mainframes, mini-computers, printers, and word processors. It gives blind people access to the kinds of information they need to do their jobs effectively.

And NOW, VERT 6000. Blind computer programmers can make their terminals "talk" with Vert 6000 because it tailors their existing system to meet their programming needs.

For further information, write to:

Telesensory Systems Inc.
455 North Bernando Avenue
Mountain View, CA 94043

OPEN COMPETITIVE EMPLOYMENT

My good friend, Lieut. Govind Nardekar, who pioneered organising Employment and Placement Services for the Blind in India, has often said that it is easier to sell refrigerators to Eskimos than to sell even trained blind labour to industry in the developing countries — where the number of able bodied unemployed run into millions. This statement may appear exaggerated. But it is truly a heart-breaking task for pioneers undertaking the work of placement of the blind in open competitive employment, especially in countries where public awareness is not created and where the industry is not awakened to the potential skills of the trained blind. For this reason alone, an effective Public Relations Committee, functioning simultaneously would be of great help.

Perhaps the greatest challenge posed to Placement Officers in developing countries is to place the blind in open competitive employment in industry. This is mainly because, in the developing countries, miracles of modern rehabilitation and the skills of the disabled — and their potential at work are not known much. Barring a few progressive industrialists, the majority of our industrialists are not alive; they do not even know the potentialities of the disabled in performing a wide variety of simple repetitive jobs for which they are fully trained. Even the methodology of giving them rehabilitation and preparing them for gainful employment are not known to them.

Our education is also not employment-oriented. In several developing countries, there is an imbalance between schools for the blind and training centres for the adult blind. The training centres for the adult blind are very few as compared to the number of blind schools. These schools impart elementary education in Braille and a few trades. This does not adequately prepare the adult blind or give him the necessary work-experience to qualify him for placement in an industry. Vocational training facilities for adult blind are quite inadequate. Intensive vocational and pre-employment training needs to be systematically organised so as to turn out well trained and qualified adult blind for placement in industry.

Techniques in Placement

It is imperative that the first blind person placed in any industry is the best available. He should have systematically gone through the following stages:

a) Medical Rehabilitation

After losing his sight, he should be thoroughly examined by a competent Ophthalmologist. Correctional or remedial action should be taken where indicated. The visually impaired with residual vision could greatly benefit from magnification and other low vision aids. Similarly, all other physical disabilities should be adequately treated and everything possible done to restore the function and to minimise the adverse effects of the disability. This is a major step towards total rehabilitation.

b) Basic Rehabilitation

Before rushing a blind person for intensive vocational training, it is essential that he should be put through an adjustment and orientation course. He should be taught to fully accept the limitations imposed by his blindness. The multi-disciplinary rehabilitation team should develop in him techniques of daily living, personal grooming, personal management, mobility skills, skills of communication, home management and social graces. The team should develop his total personality. It is extremely important that the client should have a pleasing and presentable personality, should always be well dressed and well groomed and should learn to keep excellent relations with his superiors and colleagues.

c) Vocational Training

After the client has gone through basic rehabilitation, he should be put through an intensive vocational training course. Here a distinction will have to be made between clients who, after evaluation and assessment, are found suitable for skilled occupation and those who are not.

In open competitive industry, there would be ample repetitive jobs in assembly, packaging, inspection, fabri-

cation, etc. There would also be semi-skilled and skilled jobs on power driven machinery, which the trained blind can perform well.

A good Placement Officer will maintain excellent rapport with the clients and get to know as much as possible regarding each client. This would greatly help him in proper placement.

Some of the most important factors which go to make a trainee a successful worker need to be assiduously cultivated during the vocational training stage itself. These are bi-manual co-ordination, hand-foot co-ordination, tactile perceptibility, constructive imagination, correct sequence of operations, reaction to power and work on machines, maintenance of excellent relations with his fellow workers, obedience to the foreman and the supervisory staff, compliance with their instructions, punctuality, timing, good social manners and pleasing ways.

It is also of the utmost importance that during the training stage itself, the client is groomed to be safety minded. He should be systematically trained to avoid all unnecessary risks and hazards. He should be taught to ask for help from the sighted where such help is necessary. Safety First should be his motto.

d) Work Experience

Before a trained blind person is placed in open competitive employment, particularly on power driven machinery, he should be made to work in a sheltered workshop, preferably in the light engineering section or in the type of work for which he is being prepared. This would make him familiar with all the different types of machines used in open industry. This would give him excellent work experience under factory conditions. Knowledge of such machines is most essential even for the Placement Officers, as it will very greatly assist them in effecting good placements. Providing pre-employment training and work-experience, preferably on the job on which the blind client is to be placed, would make his task easy and enable him to create a good impression in the very first few days of his placement in industry.

The Barden-La-Follite Act passed by the United States Congress in 1943 provided for the inclusion in the State — Federal Vocational Rehabilitation programmes of services to the blind.

Personnel training, research and demonstration programmes got a great fillip with the passage of the United States Public Law 565. Thus provision of training and providing work experience to the blind got great impetus by Legislation providing such services.

Placement Procedures

A good Placement Officer would endeavour to contact the industry at the highest level — preferably with good contacts from the Committee Members of other influential people.

After establishing this contact, he would undertake a detailed survey of the plant. He should locate all jobs where the use of sight is not essential and where a totally blind person can give full commercial production and efficiency.

While locating the jobs, he should take the departmental foreman and the factory Works Manager into fullest confidence. The jobs located as being suitable for the blind should have their approval.

Where possible, on-the-job pre-employment training should be organised in vocational training centres before starting the blind person on the actual job in the factory. This would give the blind person plenty of confidence to start off well in totally unfamiliar surroundings.

The Placement Officer should preferably to be with the new employee for some time and guide him in simple methods which would enable him to do the work speedily, methodically and efficiently. He should be encouraged to make the very best use of his residual abilities and neuromuscular co-ordination. He should be guided as to how to get to his place of work and back without disturbing the other workers or getting near working machinery. Great concentration and methodical working would make the blind employee safety-minded. He should avoid undue risks or hazards and ask for help where necessary.

The blind employee must cultivate good work habits, work tolerance and should be able to give good work performance.

Follow Up

It is of the utmost importance that in the initial stages, the Placement Officers regularly go on follow up visits with a view to ensuring that no difficulties or problems are encountered — either by the employers or by the employees. Minor problems should be sorted out on the spot to the mutual satisfaction of both the parties.

Job Opportunities

The late Miss Mary E. Switzer, Commissioner, Vocational Rehabilitation Administration, U.S.A., had wisely observed "the area to be explored is what human beings can achieve . . . while knowing what cannot be achieved is important too, this should not be the major focus." In Blindness — 1964, she also emphasised commitment to "a programme of intense promotion of vocational individuality for blind people — to safeguard them against being herded into lines of work convenient to society, but crushing to personality, to find instead a life work which by its very nature gives the greatest possible opportunity for functioning of each unique combination of talents." Mark the words "vocational individuality". It emphasizes the importance of personalised and individualised attention to the vocational rehabilitation needs of every blind client. The skills, goals, ambitions of every blind client would differ. He should be assisted in the free choice of a career and not herded into lines of work convenient to the Placement Officer or to society.

In progressive countries, innumerable jobs on which the blind can work well, have been identified. In most of these jobs, the blind clients are able to give full production and commercial efficiency. No element of concession is involved. A Placement Officer who is mechanically or electrically trained could be most helpful in making small adaptations or suggesting safety gadgets which may improve or add to the work performance of the blind client. Most employers are willing to provide, at their cost, such safety gadgets where essential.

If the first few placements in any industry are successful and if the blind work productively, it would open up the doors for placement of more blind persons in that industry.

A good Placement Officer should prepare industry-wise a list of all jobs on which the blind and visually impaired can work productively. This would facilitate his task of employing blind clients in the same type of industry, eg., all Textile Mills have more or less the same types of occupations on which the blind can work and give full commercial output. The same is the case with the engineering, pharmaceutical and garment manufacturing industry. These examples could be multiplied.

We should not look out for simple and repetitive jobs only. The blind too get bored. Creative types of jobs would hold their interest. An imaginative Placement Officer can, with a few minor adaptations or gadgets, make an unsuitable job perfectly suitable for operation by the blind.

The scope of employing the blind in open competitive industry is limitless. In all industries, there are repetitive jobs on which the blind can give full production. The real skill is in locating them and convincing the foreman that the blind person can do it without creating any problems. Employment in industry helps in the social integration of the blind. The industry gives full industrial wages and all other normal benefits, including terminal benefits which they give to other employees. Thus the economic position of the blind client improves very substantially. He is able not only to meet his urgent and pressing needs but also save for the rainy day.

I will, therefore, very strongly urge Governments in the developing countries to create special Employment Cells for the Disabled where they do not already exist and to try for placement of the blind in open competitive employment. I would also urge Voluntary Agencies to appoint an adequate number of Placement Officers, so as to systematically tap not only the progressive industrialists but also industrialists who have no prior experience of employing the blind. Similarly, the medium and small scale industries should also be tapped. The work needs to be gradually spread throughout the country, including the rural areas.

In several developing countries, even the fully trained blind do not get employment opportunities and are not economically resettled years after they have completed their training. This brings about frustration and the blind take to agitation and sometimes become militant. One has to realise that they are as much citizens of a Welfare State as any other citizen is. They have the

same creative urges. They also crave for love and security. We have to develop a sense of worth in them. We must also develop the sense of belonging to a group — and being wanted and approved of. They have the ability in adequately meeting difficult situations. They also love to enjoy a sense of achievement. We must, therefore, give them opportunities as are available to other citizens and allow them to fully participate in the normal occupations and in the normal life of the community.

Merits

Employment in open competitive industry has the following positive merits

— work leads to better social integration in the community,

— the blind gets full industrial wages and all other benefits, including terminal benefits,

— it ensures financial security and enables the blind to save,

— it caters to the individual tastes of the blind — both semi-skilled and skilled — by providing diversified employment opportunities,

— it generates confidence in the industrialists and workmen alike in the capacity of the trained blind to give full productive output on commercial lines,

— it gives opportunities to the blind to perfect their production efficiency and to aspire for promotions and higher responsibilities in the industry,

— it generates new employment and helps in gradually spreading the concept to other industries,

— it helps in creating public awareness in problems of the blind.

Assembly Lines

In every industry, there are innumerable repetitive jobs of fabrication, assembly of component parts, inspection and packaging.

In labour intensive industries, exclusive Assembly Lines are organised on which the disabled are given productive work. What the blind lack in vision, is supplemented by persons suffering from other disabilities. Some industries provide the conveyer belt facilities to speed up work.

In the Assembly Lines, the disabled learn to work truly as a team. Competitive team spirit enhances production.

Good Placement Officers should persuade industrialists to introduce Assembly Lines on which all categories of the disabled can be gainfully employed to the great advantage of the industry.

In Assembly Lines, even the supervisory staff could be from amongst the disabled.

By courtesy of Captain H.J.M. Desai, M.A., LL.B., I.A.S. (Retd.), this article is extracted from Planning Employment Services For The Blind In The Developing Countries

THE DISTRIBUTION AND EMPLOYMENT OF VISUALLY HANDICAPPED PERSONS REGISTERED WITH S.A.B.

This article is to be treated as a brief cross-sectional overview of the distribution and employment situation of visually handicapped persons registered with S.A.B. at a point of time, as the statistical data are based on the master register with the Rehabilitation and Social Service Unit as on 31.7.1983. This is by no means the trend, which will then involve a study of statistical data collected over a longer period of time.

The total number of visually handicapped persons registered with S.A.B. is 1095 on 31.7.1983, of which 636 are males and 459 are females.

The distribution according to age group and sex shows a greater number of visually handicapped persons in the above 60 age-group as compared with the rest. There are 199 males and 157 females in this age group giving a total of 356 visually handicapped persons which is 33% of the population. The number of visually handicapped persons in this age group is expected to increase over the next 40 years or so. Thus, attention will have to be given to the provision of social services for this age group.

There is a marked decrease in the number of visually handicapped children below 10 years-old. There are 25 males and 12 females in this age group which totalled 37. This group forms 3.4% of the total visually handicapped population registered with S.A.B.

The small number in this group could possibly be due to good medical facilities available in Singapore and government policy on family planning and quality child-care.

Another group of visually handicapped persons of which majority of them are either schooling or training at Industrial Training Centre are those between 10 to 19 years old. There are also several of them who are working in jobs such as clerk, telephone operator, factory worker, labourer, sweeper and so on. This is shown in the different graphs showing male and female visually handicapped persons registered with S.A.B. in the different types of employments in the different age groups.

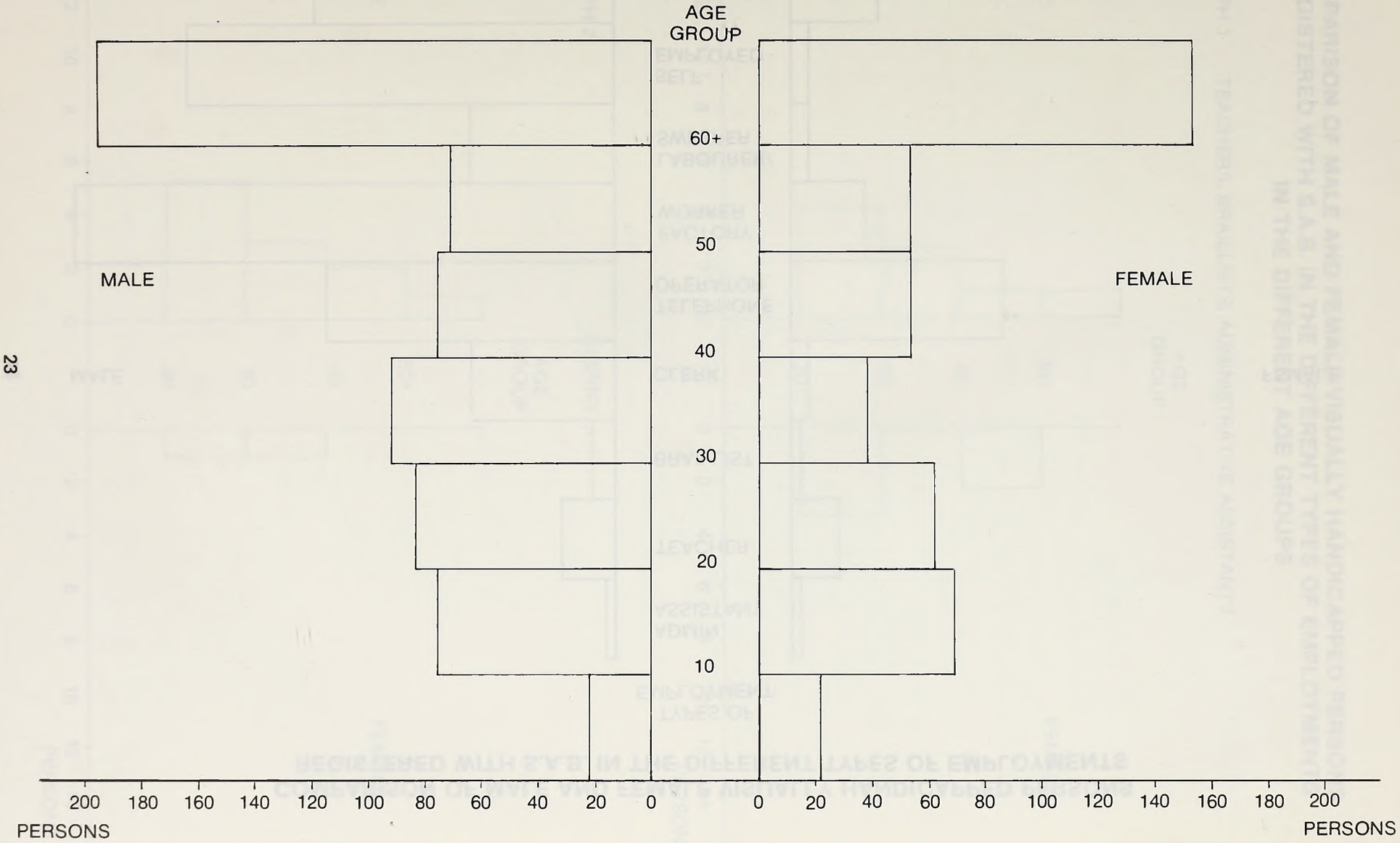
The distribution of visually handicapped persons of the various age groups between 10 to 59 years old, according to sex are quite even. A point to note is that there are more male visually handicapped persons in all age groups as compared with female visually handicapped persons.

This is also true in the different types of employments shown in graphs 1 to 5. One possible reason is that visually handicapped females prefer to be full time housewives once they are married. As for those who are not married, over-protection by the family has possibly led them to live a sheltered life.

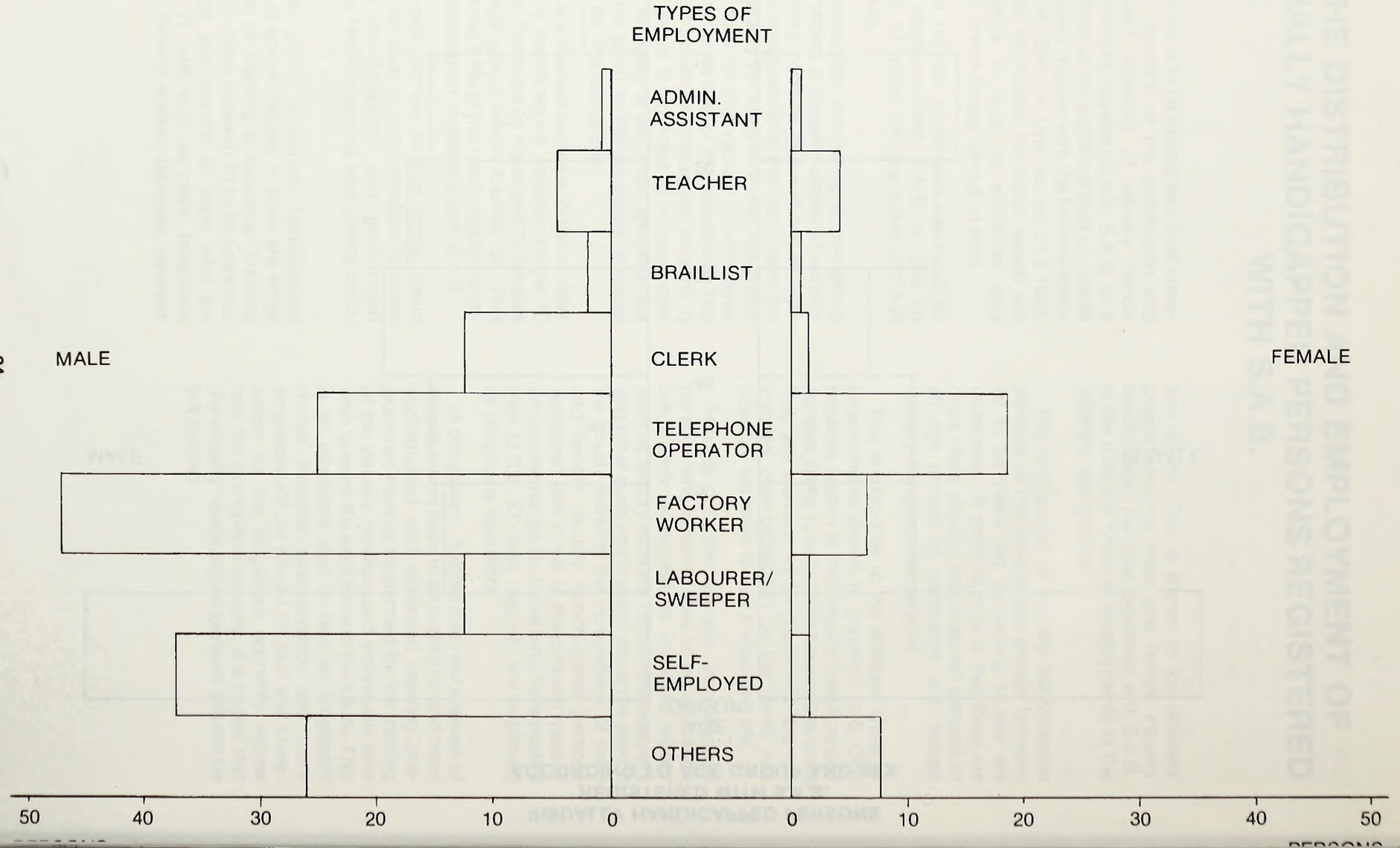
Majority of the visually handicapped persons who received less or no education are mainly employed as unskilled labour such as factory workers, labourers, sweepers and other such employment as can be seen in the graph showing the comparison of male and female visually handicapped persons registered with S.A.B. in the different types of employments. As for those who have passed their G.C.E. 'O' level, majority are employed as telephone operators.

In conclusion, it is felt that new avenues of employments have to be looked for and more sophisticated and advanced training programmes have to be planned for the training of the visually handicapped individuals who wish to enter the work force in the future. This is an inevitable step to take as Singapore moves towards specialisation and more emphasis will be placed on skill and knowledge. As the Singapore economy moves into the twenty-first century, it is hoped that the visually handicapped persons will not be left behind.

VISUALLY HANDICAPPED PERSONS REGISTERED WITH S.A.B. ACCORDING TO AGE GROUP AND SEX

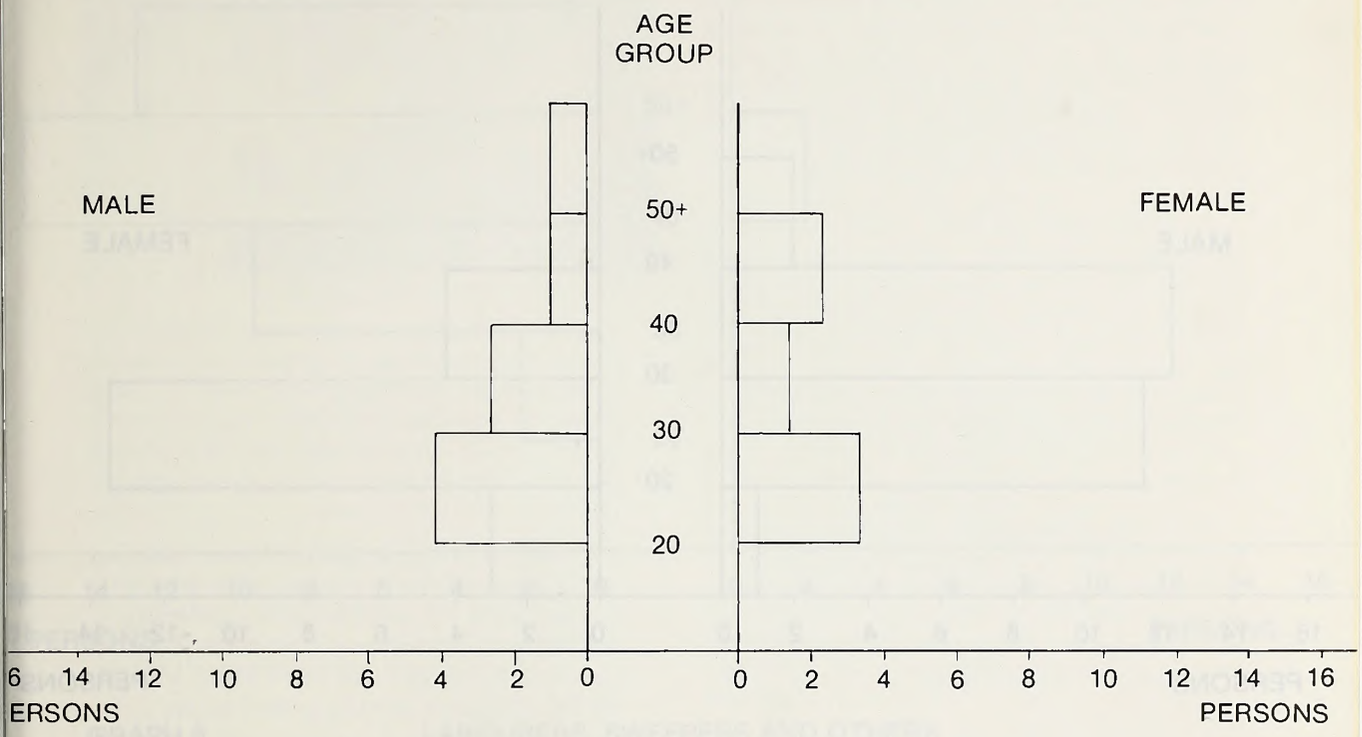


COMPARISON OF MALE AND FEMALE VISUALLY HANDICAPPED PERSONS REGISTERED WITH S.A.B. IN THE DIFFERENT TYPES OF EMPLOYMENTS

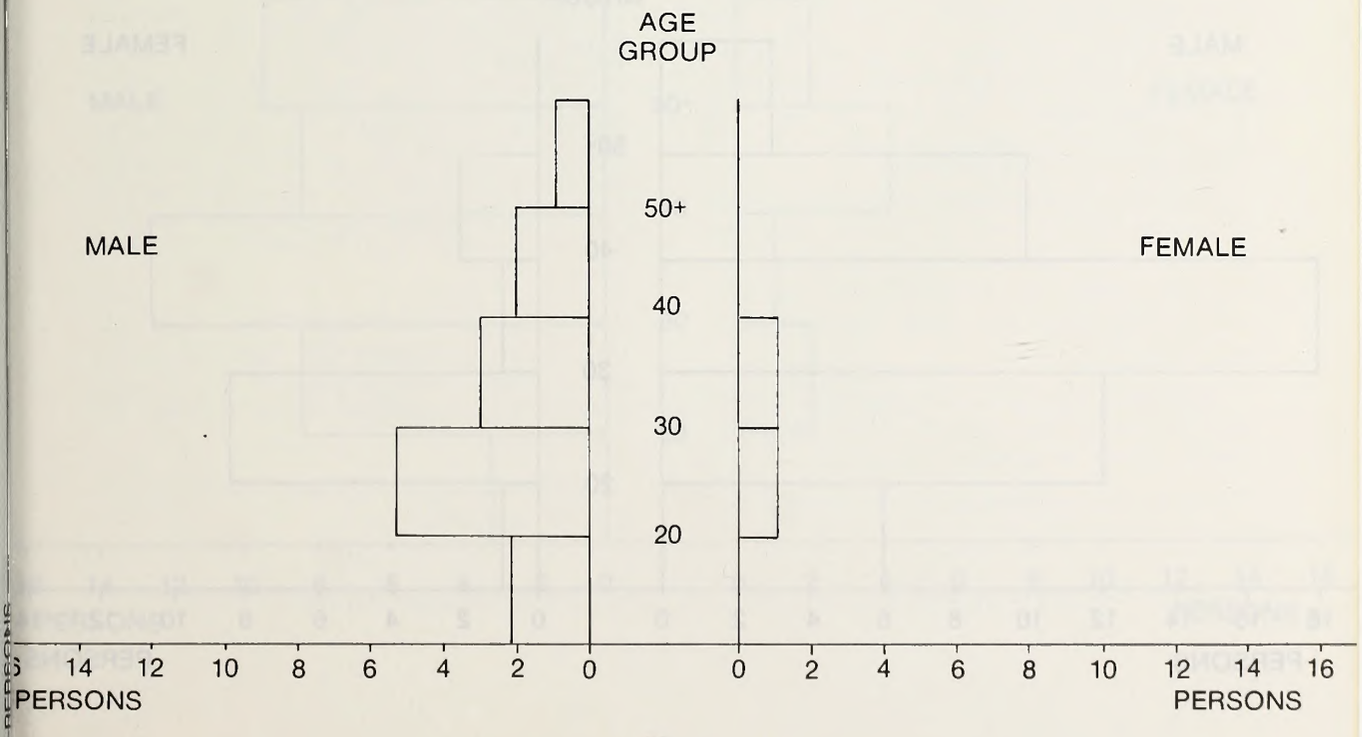


COMPARISON OF MALE AND FEMALE VISUALLY HANDICAPPED PERSONS REGISTERED WITH S.A.B. IN THE DIFFERENT TYPES OF EMPLOYMENTS IN THE DIFFERENT AGE GROUPS

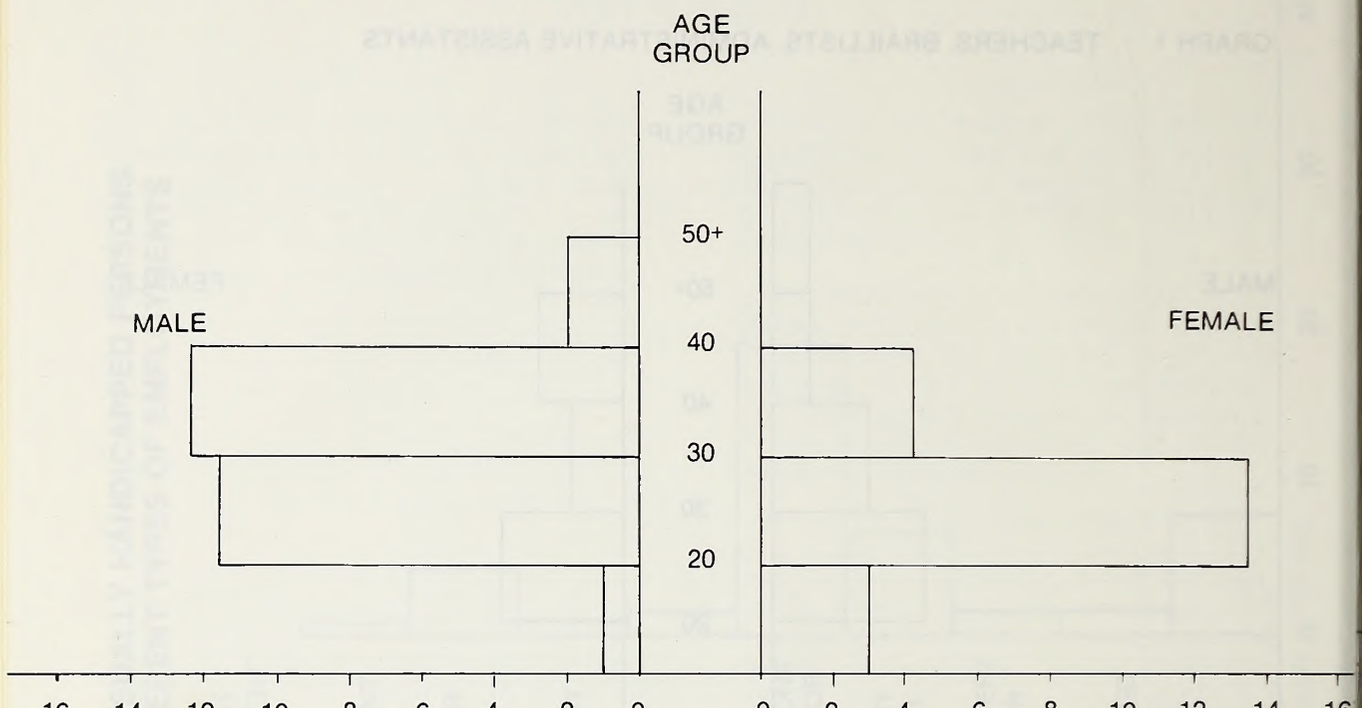
GRAPH 1 TEACHERS, BRAILLISTS, ADMINISTRATIVE ASSISTANTS



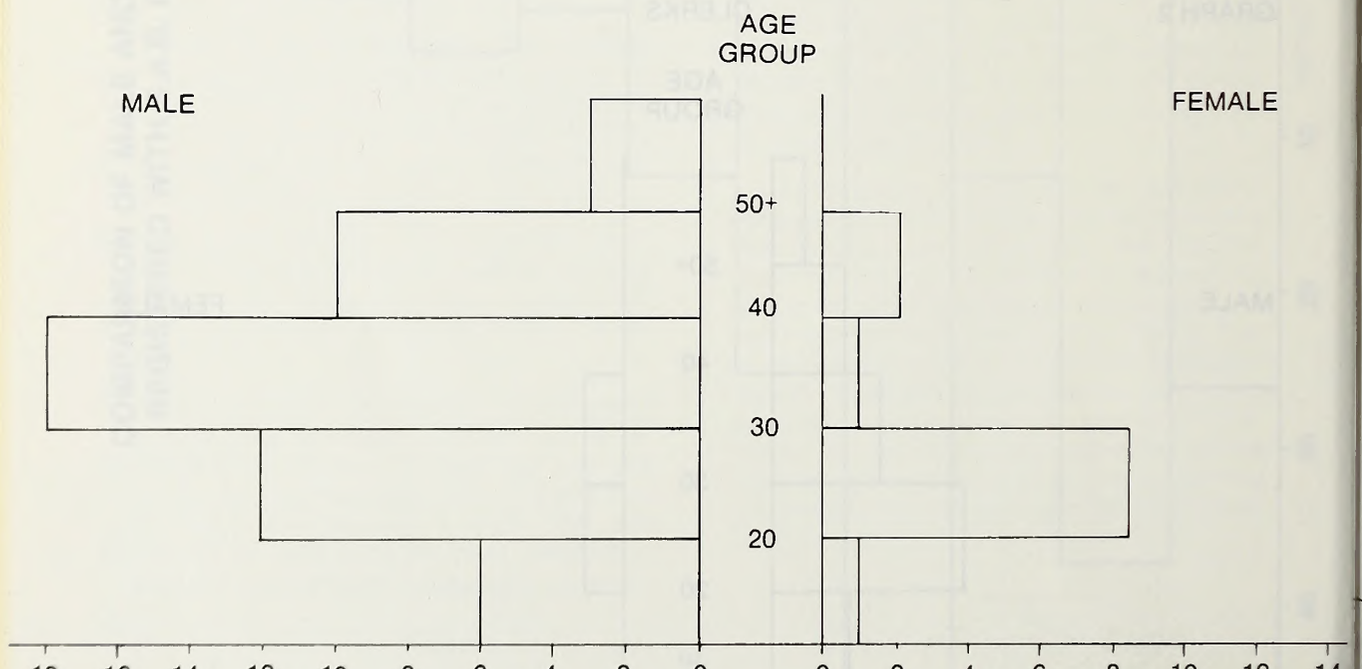
GRAPH 2 CLERKS



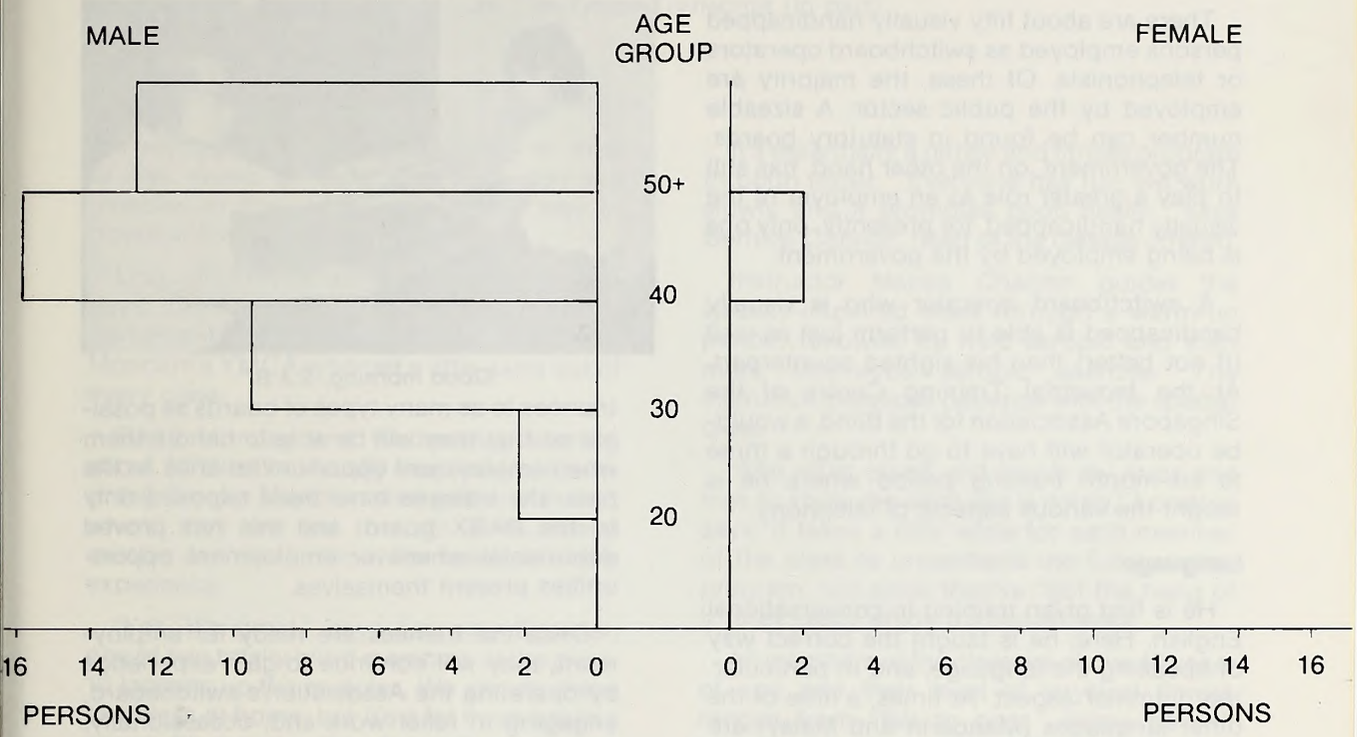
GRAPH 3 TELEPHONE OPERATORS



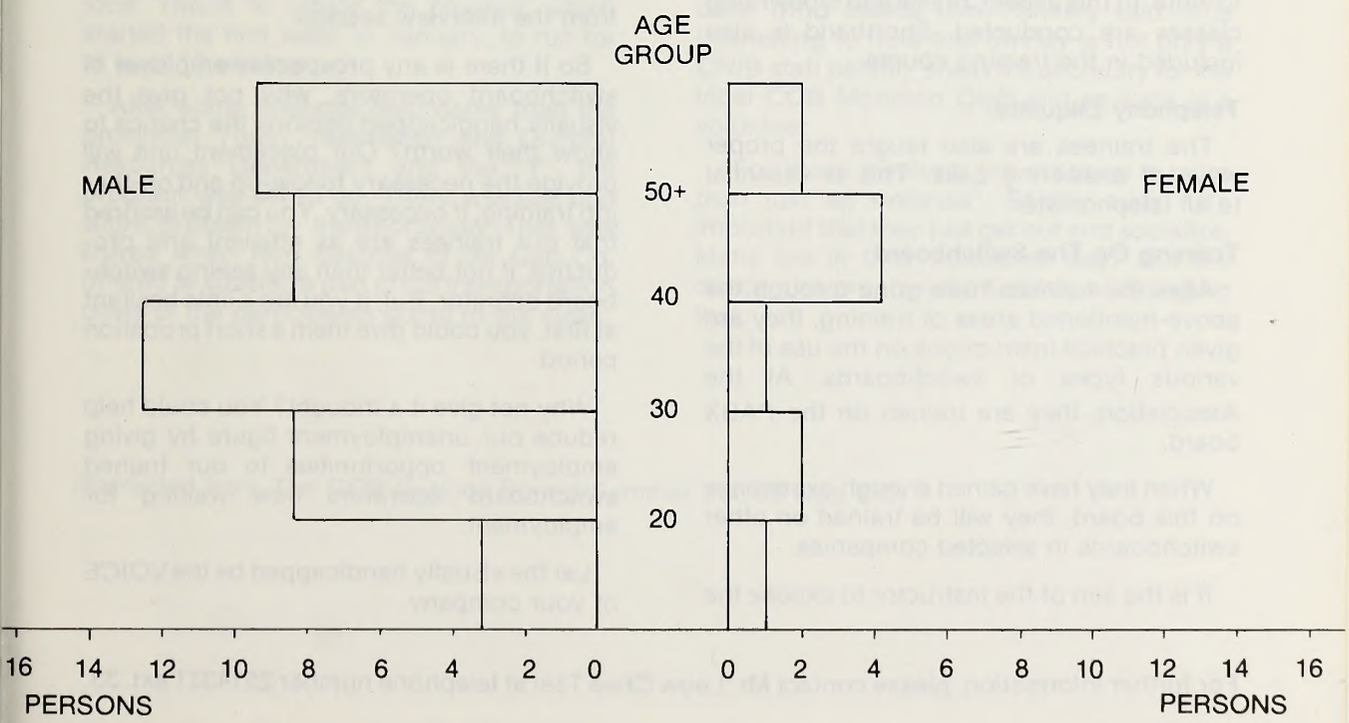
GRAPH 4 FACTORY WORKERS



GRAPH 5 SELF EMPLOYED



GRAPH 6 LABOURERS, SWEEPERS AND OTHERS



LET THE BLIND BE THE VOICE OF YOUR COMPANY

There are about fifty visually handicapped persons employed as switchboard operators or telephonists. Of these, the majority are employed by the public sector. A sizeable number can be found in statutory boards. The government, on the other hand, has still to play a greater role as an employer of the visually handicapped, for presently, only one is being employed by the government.

A switchboard operator who is visually handicapped is able to perform just as well (if not better) than his sighted counterpart. At the Industrial Training Centre of the Singapore Association for the Blind, a would-be operator will have to go through a three to six-month training period where he is taught the various aspects of telephony.

Language

He is first given training in conversational English. Here, he is taught the correct way of speaking the language, and in particular, the grammar aspect. At times, a little of the other languages (Mandarin and Malay) are also taught to the trainees.

Braille And Typing

Closely related to language is the ability to write. In this aspect, braille and typewriting classes are conducted. Shorthand is also included in the training course.

Telephony Etiquette

The trainees are also taught the proper ways of answering calls. This is essential to all telephonists.

Training On The Switchboard

After the trainees have gone through the above-mentioned areas of training, they are given practical instructions on the use of the various types of switchboards. At the Association, they are trained on the PABX board.

When they have gained enough experience on this board, they will be trained on other switchboards in selected companies.

It is the aim of the instructor to expose the trainees to as many types of boards as possible so that they will be able to handle them when employment opportunities arise. In the past, the trainees have been exposed only to the PABX board; and this has proved detrimental whenever employment opportunities present themselves.

"Good morning, S.A.B."

Once the trainees are ready for employment, they will continue to gain experience by operating the Association's switchboard, engaging in relief work and, occassionally, they will be brought out for refresher courses on the various types of switchboards.

Trainees are also taught how to face an interview. They are taught what to expect from the interview session.

So if there is any prospective employer of switchboard operators, why not give the visually handicapped persons the chance to show their worth? Our placement unit will provide the necessary follow-up and on-the-job training, if necessary. You can be assured that our trainees are as efficient and productive, if not better than any seeing switchboard operator. But, if you are a little hesitant at first, you could give them a short probation period.

Why not give it a thought? You could help reduce our unemployment figure by giving employment opportunities to our trained switchboard operators now waiting for employment.

Let the visually handicapped be the VOICE of your company.

For further information, please contact Mr. Leow Chee Tsai at telephone number 2514331 ext. 33.

"DANCERCISING" — A Unique Class Being Held at Moncton, N.B. YMCA

from The Times-Transcript (in part)

They move their arms and legs in time to the music — stretching long-dormant muscles as they "dancercise" their way to physical fitness.

Lots of people are dancercising these days, but there is at least one group of participants in a dancercise class at Moncton's YMCA who get a little extra out of every class.

Every Monday and Wednesday evening about 10 blind or visually-impaired residents of the Greater Moncton area gather at the "Y" where they are led through a 45-minute aerobic exercise routine. For some, its a new experience.

"Yes, it's great," says Lorraine Cormier, one of two totally blind members of the class. "It loosens up the muscles. We can do these exercises at home, but it's a lot more fun in a group. It's a real outing for us."

For some, it is the first exercise they've had in years, says Shirley Hilton, of the local CNIB office. The CNIB got together with the local YMCA to create the program which started the first week in January, to run for at least 10 weeks.

After some financial help came from the provincial Youth, Recreation and Cultural Resources Department and the "Y", the program was set to go. There was just one slight problem — transportation. That was solved when Ron Saulnier of Air Cab Co. offered to subsidize part of the transportation costs of the participants going to the class.

It's essentially a dance and fitness program through music. "Everyone has fun, we work slowly and it promotes good health," says Bernice Connor, head of the classes offered.

Instructor Marise Charron guides the visually-impaired class through a warm-up period, followed by mild aerobic and then more strenuous aerobic exercise. The instructor practices patience with the special class.

"She must come and touch my arms and legs to show me what she is doing," Lorraine says. It takes a little while for each member of the class to understand the full exercise program, but once they've "got the hang of it" they really enjoy the movements.

All members of the class are above 40 years of age and their level of physical fitness ranges from "fair to poor." Some haven't exercised in years while others take part in the Institute's bowling or curling programs.

The only man in the class is 83 years old and does his exercise routine "with his white cane lying beside him," Shirley said. It is interesting to note that Shirley is not only a CNIB staff person, she is the secretary for the local CCB Moncton Club and as such is a volunteer.

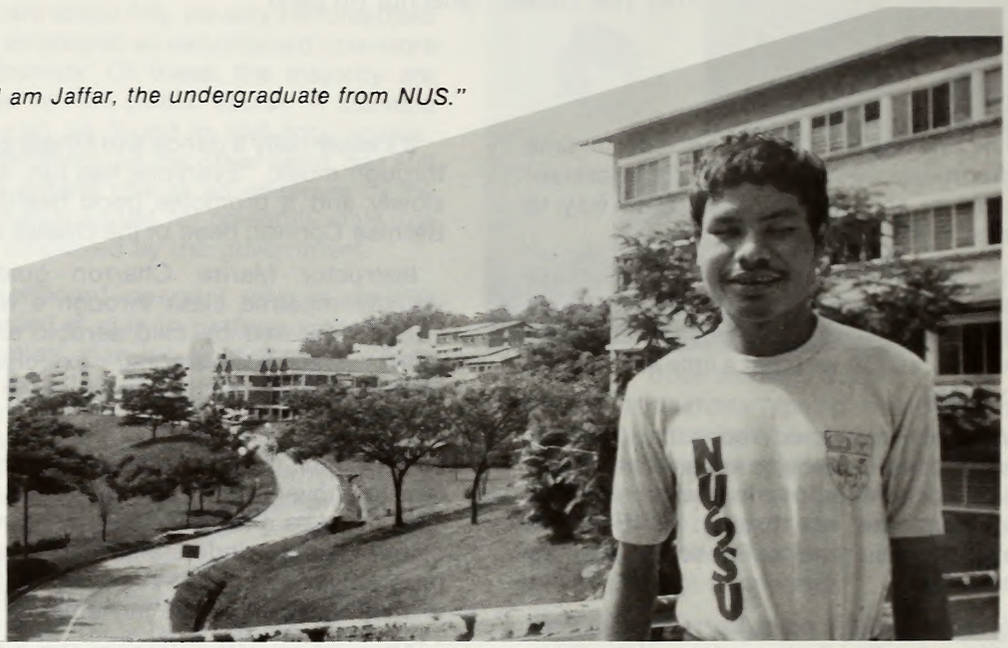
"For those involved, the program is more than just an exercise", Shirley adds. "It's important that they just get out and socialize. Many are in their homes all day," but the dancercise program is a first step at changing that.

(Extracted from The CCB Outlook Spring/Summer Vol. 36 Nos. 2/3)

PROFILE

by Jaffar Sidek Bin Ahmad

"Hi, I am Jaffar, the undergraduate from NUS."



Here is an account given by Jaffar himself of his struggle to get into the University. He is now in his first year and is reading History, Sociology and Philosophy. He shows that determination is the key to success.

The question that has so often been put to me by my friends is this: "How did you ever make it into University?" The reply was inevitable: "I don't know."

Indeed, I feel queer not knowing how I made it but that is the most honest answer that I can give so far. However, I shall attempt to guess, funny though it may be.

Well, to start with, I wasn't born into a well-to-do family. We lived (all seven of us) in a single room house situated in a slum area. There was no electricity, no piped water or any sanitation. It seemed that the environment in which I was born was determined to avenge some misdeed I did not do.

As if that was not enough, I contracted several diseases. At three, I caught German Measles and as a result lost my sight. At five, I contacted Poliomyelitis and was almost confined to a wheel-chair. But due to divine intervention, that despicable fate was averted.

But my childhood wasn't so bad — thanks to an unexpected turn of events which changed both my mental and physical way of life.

At seven, my mother sent (not forced) me to the School for the Blind for my primary education. I received an all-rounded education which allowed for academic improvements as well as personality development. The very essence of my education, I think, was independence. We received instructions in the skills of daily living — washing, some light cooking and ironing.

My stay in the Association was a fruitful one. I developed both mentally and physically. We were treated like normal children and that made the difference. Indeed, I had proven to others and to myself that given the training and the chance, I could progress. My stay in the Association also developed in me that sense of wanting to strive for whatever I wanted.

Well, I guess that it was this education that made me feel normal. It made me feel that though I had lost my sight, that loss of sight meant very little to me compared to the lessons and experiences that I have gained.

"This way to my hostel."

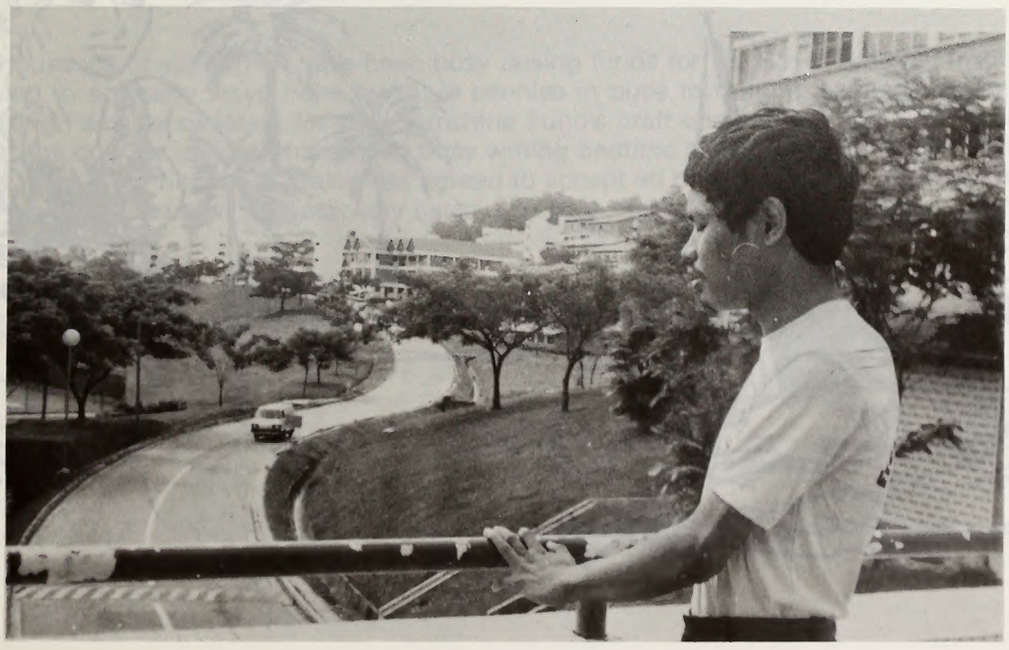
Having been equipped to face the world of reality, I went to Ahmad Ibrahim Secondary School for my secondary education. This was something new. For one thing, my class was bigger. This meant that my circle of friends increased and so did my perspective. I learnt more about people. I began to realise that I have to be alert or I would be overwhelmed by this sea of people. Hence, my determination grew with the days and continued through my college days. Though this sense to strive dwindled somewhat, due to some reason or other, I managed to pick myself up again when I had to repeat my G.C.E. 'A' level to enter the University.

Yes, the University. It was that word which burnt me, that word which spurred me on even when I found myself giving up, that word which haunted me all through my childhood days. I thank the Association for developing in me determination. It is my belief that it was the dream of gaining entrance into the University that really drove me on.

Why does that word seems so magical? By thinking about it, it turned my life around and made me try harder. I think there are two main reasons. Firstly, I want society to see that our disability is not a barrier which will prevent us from achieving our goals. Secondly, I believe that by being in the University, I can show the world that we too have determination as anyone else.

Today, I have seen my dream come true. I am there at the University. Yet I still don't know how I got there. I have given an account of how I've struggled to get into the University but I am not sure if they are correct.

The only worry that is bugging me at the moment is the question of my employment after the three or four years in the University. Nevertheless, I keep telling myself that I am determined to succeed in my University course and that I should not let my future worry me at this moment.



"It's a long road ahead."

BLIND SAILOR TO SAIL FROM FRISCO TO HONOLULU

Hank Dekker, who is blind, wants to demonstrate to employers that handicapped people can learn new skills. So, this week he will leave on a solo sailing voyage to Honolulu.

"There is one thing I am not and that is a hero," says Mr. Dekker, 41, who was blinded by glaucoma 11 years ago. "If I didn't think I could make it, I wouldn't get on that boat."

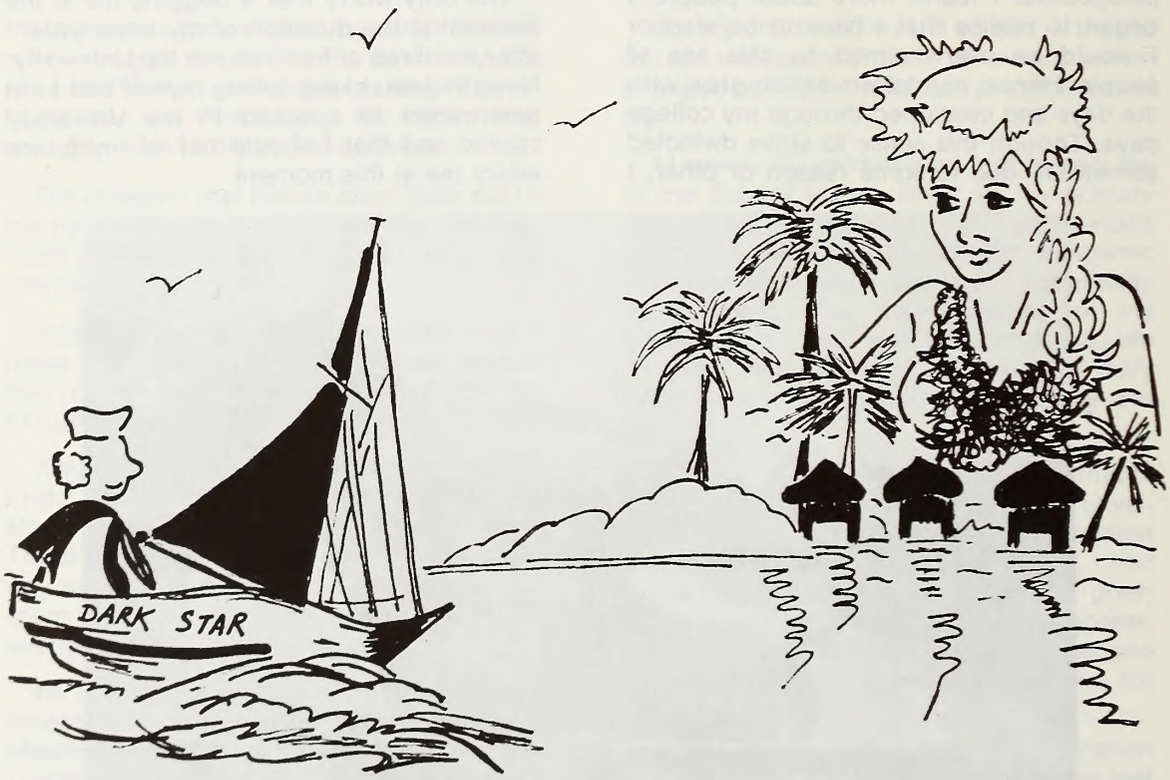
The San Francisco man will use an automatic radar system, a Braille compass and Braille charts on board his 7.6m sloop Dark Star when he departs from San Francisco bound for Hawaii in a few days.

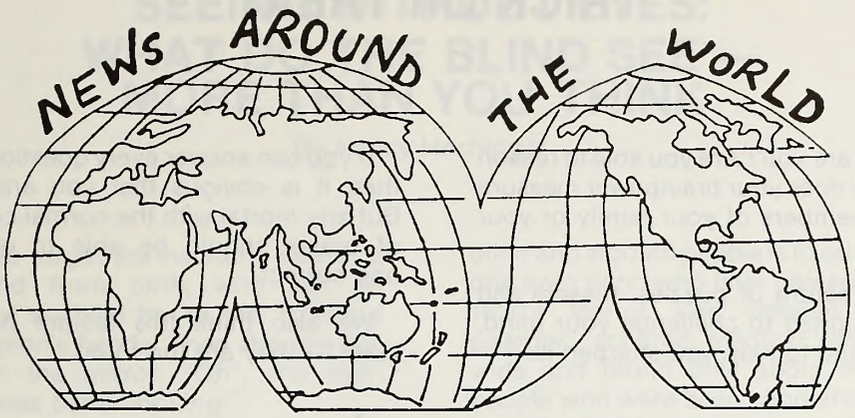
He said it should take 19 to 25 days to reach his destination.

Mr. Dekker, who has about two per cent vision, taught himself to sail about three years ago and has made several solo trips from Northern California to Baja California.

"I want to show industry that a blind person can learn new skills and do something challenging," Mr. Dekker said.

Mr. Dekker's parents are financing most of the trip and have spent about $10,000 for expenses and equipment for the boat.





ENGLAND

Two ex-Worcester and Chorleywood pupils were awarded first class honours degrees, in Computing and Data Processing and in French, and are now doing PhDs. They are helping 458 students in universities, polytechnics and the Open University, the highest number ever. Their two Student Advisers travel around the country giving advice on study methods, special equipment and arrangements for examinations. Their braille and tape libraries transcribe or record books on request for individual students, using volunteers as well as highly qualified staff, who use their ingenuity to translate charts or diagrams — or electrical circuits, perhaps, or parts of a delphinium — into words.

Thousands of supporters have been busy raising funds for the Royal National Institute for the Blind in so many ways from piling up pennies in pubs to running sponsored marathons to knitting Fair Isle sweaters for their Sunshine Fund's craft competition and even in schools all over the country children have been busy writing bedtime stories for HRH Prince William of Wales. HRH The Princess of Wales has agreed to accept on behalf of her son 'A Royal Book at Bedtime'. This campaign is generously backed by H. J. Heinz Company Limited.

(Extract from THE NEW BEACON June 1983 Vol LXVII No. 794)

TRICK OR TREAT

How smart are you? Are you able to reason quickly? How does your brainpower measure up against members of your family or your friends?

This new feature of puzzles, teasers and tests are designed to challenge your mind, to stretch it and to help you sharpen it.

If you can answer every question correctly, then it is obvious that you are a genius. But any mortal with the normal complement of brains should be able to get at least one correct.

We also think this feature has another asset — they are fun to do.

ENJOY YOURSELF!!

1. What word contains seven letters, in which the first two letters make reference to a man, the first three letters refer to a woman, the first four letters identify a great man and all seven identify a great woman?

2. Why did the lobster blush?

3. What word is always pronounced wrongly?

4. What date within the last hundred years reads the same upside down?

5. A frog at the bottom of a well ten metres deep, begins to climb out. He climbs up three metres every day but slips back two metres each night. After how many days will he be free?

SEEING WITHOUT EYES: WHAT DO THE BLIND SEE — MORE THAN YOU THINK

By Nancy Hechinger

It is hard to forget the haunting tale of a woman, blind from birth, who had an operation that enabled her to see. First she saw her surgeon's hands. Then she saw her own face in the mirror. "Oh", she said, "I thought I was better looking."

What has she thought she looked like? It is clear from her remark that even though she had never seen a thing, she had a visual image of herself in her mind. This small story raises some big questions. Do blind people visualize the world in their mind's eye? If so, where do they get the information to build those images?

For any of us to visually recognize anything, we must match what we see with a mental image, or internal representation. I recognise the small boy in front of me as my son because the boy I see matches the idea of that boy in my mind. Vision enables us, among other things, to recognise forms. Several centuries ago, Descartes proposed that a blind man, by tapping objects with a stick, uses touch to build his mental image of the world. He believed that a sighted person trying to make out objects with a stick in a darkened room finds this kind of sensation confused and dim. But, Descartes hypothesized, "If you take men born blind, who have made use of such sensation all their lives, you will find that they feel things with such perfect exactness . . . . one might almost say that they see with their hands."

How similar are the mental images of blind and sighted people? That is a hard question to answer. Language is imprecise, it was invented by the sighted. When Helen Keller was asked to define a straight line, she said, "When I have something to do that must not be set aside, I feel as if I were going forward in a straight line bound to arrive somewhere, or go on forever, without swerving to the right or to the left." A young blind girl defined "Beautiful" as something brought about only by great effort.

One way to compare the mental images of blind and sighted people is to question someone born blind who later gained sight. In the 1930's Marius Von Senden, a German scientist, scoured medical records worldwide and found only about 50 reports of people who were born blind and later cured. Von Senden's report suggests that there is a big difference in the perceptions of these people. One patient named Joan thought that people and trees belonged in the same category for they both have central trunk that you can put your arms around, and no sharp edges. From the trunk emerged limbs. In a man, these limbs can move. In a tree, they are stationary. The revelation that "Men do not really look like trees at all" came a surprise to Joan when she gained her sight.

Another way to examine the mental images of the blind is to ask them to draw pictures of objects. Lines inform us about the shape and boundaries of things; they indicate point of view. Knowing this, John Kennedy, a professor of psychology at the University of Toronto, has spent the last nine years working with people born blind.

Kennedy gives the subjects a plastic sheet that produces a raised line when a ballpoint pen is moved across it and asks them to draw objects — a cup, a hand, a table. A picture is an abstraction — a two dimensional representation of a three-dimensional object. But the blind sense their world only through touch; their experience is strictly three-dimensional. Surprisingly, Kennedy says, the blind people quickly realise that some aspects of reality must be sacrificed in a drawing. You cannot draw a cup from all sides at once; a point of view has to be selected. The blind artists devise ways to convey reality, and these solutions are readily understood by sighted people either at a glance or with a brief caption, such as "This is how it would look from the top," or "This is how it would look from the side." One person drew a rectangular shape and made the horizontal lines thicker near the centre, explaining that it would make the shape

appear rounder.

What surprised Kennedy most is that his blind artists understood the principle of occlusion. When drawing a picture of a hand with the fingers closed, they knew that part of the back finger would be covered by the front finger.

There is a critical difference between sensation and perception. The senses are the brain's scouts; they bring in bits of the outside world. Each sense has its own range and specific sensitivity to external stimuli. The eye responds to light, the ear to sound, touch to texture and pressure. How the brain interprets the information the senses delivered to it is perception. There is more to seeing than meets the eye. The brain is blind. Wavelengths of light are sent to the retina at the back of the eye where they are transformed into brain code and sent up to the visual cortex via the optic nerve and visual pathways. The information is rather dull: merely reports of contours, edges, and positions. How then do we see cups and trees and summer sunsets?

Each of us holds certain mental images or representations of how things look. Most models are not innate but built on our experience. Psychologist-Philosopher William James called the newborn baby's world a "Booming, buzzing confusion" because his experience is all sensation. His lack of experience denies him the ability to organise sensation into meaningful perceptions. The doctor of the blind patient, Joan, reported that when she was first able to see she went through the experience that we all go through the moment we are born. She saw different, meaningless levels of brightness. She wasn't even positive that these strange sensations were coming through her eyes until she closed and found that the sensations stopped. Von Senden called this experience a "State of pure sensations." Once a baby of blind person learns to see, he no longer experiences pure sensation; he has a model, activated by sensory information, which he experiences as sight.

Perception fills in the gaps left by incomplete sensory information. We recognize a cup even though we see only one side; we don't often check to see if there is a bottom. The properties of weight, size, texture, form, function, and colour figure into the final decision of what the thing is. Through touch a blind person can gain almost all the same information as a sighted person.

Our most efficient and informative sense becomes our dominant mode for knowing the world. For sighted people, vision is the dominant sense. Touch may be for the blind. Richard L. Gregory, a leading perceptual psychologist, worked with a man called S.B. who at 53 had an operation which made it possible for him to see for the first time in his life. But the man had to learn to see, to transfer the knowledge he had gained through touch into sight. It was much like learning a second language. Before his operation, S.B. had been an expert at using a lathe. When Gregory showed him the tool for the first time, he did not know what it was. Then Gregory handed him the tool. He closed his eyes and explored it with his hands, and said, "Now that I have felt it I can see!"

Because S.B. had always been active, he learned to see moderately well — especially things he had known first by touch. The importance of active exploration in learning to see was shown in a famous experiment in the early 1960's by Richard Held and Alan Hein at Brandeis University outside Boston. They raised kittens in total darkness except for an hour a day when they were allowed to see. One group was allowed to move around a patterned cylinder; another sat passively in a Gondola pulled by a kitten from the "Active Group." Later both groups were released from darkness. The active kittens learned to see normally, but the passive ones were blind.

Other researchers varied the experiment by showing groups of cats restricted from specific information. Some were exposed only to vertical lines, some only to horizontal ones, others only to diagonal ones. When the cats were freed, they could see things only in the orientation to which they had been exposed. Because the sense of touch has a more limited range than sight, the blind have few methods for judging distance. Looking out of a window 30 to 40 feet high, S.B. thought he could lower himself to the ground.

In designing mobility aids for the blind, biophysicist, Carter Collins capitalizes on their finely tuned sense of touch. He impresses televised images on to the skin using electrical stimulation in a project called Tactile Sensory Replacement (TSR) at the Smithkettlewell Institute of Visual Sciences in San Francisco. In one version to TSR, a

blind person sits with his back against a chair covered with a grid of hundreds of tiny cones. A TV camera mounted to the right of the person's head converts an image into a pattern of dots which it matched, point for point, to the grid touching the person's back. The dot pattern formed by the image in turn activates the appropriate cones, and they vibrate against the skin, allowing the person to recognise the object.

A more recent version weighing only five pounds is entirely portable. A ten-inch square with over a thousand stimulators is worn around the waist; the TV camera is mounted on a pair of glasses; the circuitry and batteries are incorporated in a vest. Blind students have been able to find and retrieve objects around a room, read metres, even use an oscilloscope. One blind technician learned to assemble things as small as micro-circuits.

Asked why he had chosed touch instead of another sense, like hearing, Collins said, "Of all the senses, touch is closest to vision. No matter how acute your hearing is, it is a cue for location and distance only — not forms. But the thing about vision and touch is that they are both two-dimensional systems. What you see in front of you is essentially a frame on which patterns of light and shadow are played. You see in three dimensions because you can move your neck and eyes, and you have binocular vision. Each eye sees a slightly different picture which gives the impression of three dimensions, like the old-fashioned stereoscopes. When a person wears a TSR vest, the camera moves as the neck and body move, just as the eyes do in sighted people."

Still I could not understand what form this representative might take. I sat blindfolded in the chair, the TSR cones cold against my back. At first I felt only formless ways of sensation. Collins said that he was just waving his hand in front of me so that I could get used to the feeling. Suddenly I felt or saw, I wasn't sure which, a black triangle in the lower left corner of a square. The sensation was hard to pin-point. I felt vibrations on my back, but the triangle appeared in a square frame in my head. There was no colour, but there was a light area and a dark area. If you close your eyes, a difference appears in the darkness. That difference is approximately what I saw. The image was fuzzy at first, but, even in my ten minutes, in the chair, it became clearer. When Collins confirmed that he was holding a triangle, it was clearer still.

For me, believing that there is a difference between sensation and perception has always required an enormous leap of faith. It is hard to believe that I do not see with my eyes or hear with my ears. Although we may learn that there is a difference between sensation and perception, we rarely experience what Von Senden called "Pure Sensation." At the TSR lab I experienced the difference for the first time. The sensation was on my back, the perception was in my head. Feeling is believing.

There is an old story called "The Elephant in the Dark." One day an elephant appeared in the main square of a town where all the inhabitants were blind. No one in the town knew what the animal was, so the king sent out his three wisest men, all blind, to find out. One, who touched only the leg, reported that the beast was like a column. The second, who touched only the trunk, said the beast was like a huge trumpet. The third, who touched only the ear, said the beast was wide and flat like a rug. Like the kittens, their explorations were limited. By investigating only one part, they missed the whole. The wise men lacked perception.

But life does not necessarily imitate parable. In one of his studies, Kennedy handed blind children plastic sheets with parts of an elephant attached onto them. In 39 out of 41 cases, the children recognized that altogether the pieces made up a picture of an elephant. They lack sight but not perception.

IT'S TICKLING TIME

Salesman to couple: "You are now insured against fire, flood, theft, liability, disability — and any attempts on my part to sell you more insurance."

Husband, examining bills, to wife: "Remember on our vacation when we spent money like there was no tomorrow? Well, it's tomorrow.

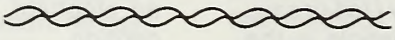
Little boy to mother: "May I go over to Jim's house and play with his toys? Mine are all educational."

"Do you believe in life after death?" the boss asked one of his younger employees.
"Yes, sir."
"Well, then, that makes everything just fine," the boss went on. "About an hour after you left yesterday to go to your grandfather's funeral, he stopped in to see you."

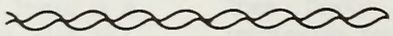
Sign at a motel: "Because of inflation our single rooms are double."

Neighbour to neighbour: "He ought to stay home more often and take his wife out."

A solar-powered computer wristwatch, which is programmed to tell the time and date for 125 years, has a guarantee — for two years.



A FRESNO, Calif., woman found that her wristwatch wouldn't work, so she wrote to the manufacturer. When she got no answer, she sent the company a telegram reading: "I have one of your watches. What time is it?" That did it — they sent her a new watch.



THE WAYSIDE CHAPEL

BACKGROUND:

An English Lady, while visiting Switzerland, was looking for a room, and she asked the schoolmaster if he could recommend any. He took her to see several rooms and when everything was settled, the lady returned to her home to make the final preparations to move. When she arrived home, the thought suddenly occurred to her that she had not seen a 'W.C.' (Water Closet Toilet) around the place. So she immediately wrote a note to the schoolmaster asking him if there was a 'W.C.' around. The schoolmaster was a very poor student of English, so he asked the parish priest if he could help him in the matter. Together they tried to discover the meaning of the letters 'W.C.' and the only solution they could find for the letters was a "Wayside Chapel". The schoolmaster then wrote the following note to the English Lady.

Dear Madam,

I take great pleasure in informing you that the 'W.C.' is situated nine miles from the house in the center of a beautiful grove of pine trees surrounded by lovely grounds.

It is capable of holding 229 people and it is open on Sundays and Thursday only. As there are a great number of people expected during the summer months, I would suggest that you come early; although there is usually plenty of standing room. This is an unfortunate situation, particularly if you are in the habit of going regularly.

You will, no doubt, be glad to hear that a good number bring their own lunch and make a day of it. While others, who can afford to go by car, arrive just in time. I would especially recommend your Ladyship to go on Thursday, when there is an organ accompaniment. The acoustics are excellent, and even the most delicate sounds can be heard everywhere.

It may interest you to know that my daughter was married in the 'W.C.' and it was there that she met her husband. I can remember the rush there was for seats. There were ten people to a seat usually occupied by one. It was wonderful to see the expressions on their faces.

The newest attraction is a bell donated by a wealthy resident of the district. It rings every time a person enters. A Bazaar is to be held to provide plush seats for all since the people feel that it is a long felt need. My wife is rather delicate so she can't attend regularly. It is almost a year since she went last. Naturally, it pains her very much not to be able to go more often.

I shall be delighted to reserve the best seat for you, if you wish, where you will be seen by all. For the children, there is a special time and place so that they will not disturb the elders.

Hoping to have been of some service to you, I remain,

Sincerely yours,
THE SCHOOLMASTER

.....

So far as we know, it pains no one to trade here.

Some come here With Cheer — others With Charity, but all leave satisfied.

A BRILLIANCE SOMEWHAT MISUNDERSTOOD

Deaf-blind persons' view of Helen Keller
by Ms. Dale Brown
Communications staff of the President Committee

Helen Keller is one of the best known disabled persons in history. The story of this deaf and blind woman who was born in 1880, wrote books, and spoke in public has been told many times. She is a heroine to able-bodied persons, many of whom she has inspired to overcome personal difficulties.

But an interesting question is, what does her life mean to other deaf-blind persons, have strong opinions on this issue — opinions which rarely have been heard before. In general, they admire what Keller accomplished. But they feel that misconceptions about deaf-blind people have resulted from the public's focus on Keller and the circumstances of her disability.

Deaf-blind people are well aware of the pioneering role of Helen Keller, although most have difficulty remembering the first time they heard of her. The remarks of Isaac Obie, a 33 years old teacher from Massachusetts, are typical. "I don't know when I first heard about her, but I learned about her life from reading her autobiography, Story of My Life, while in school."

This autobiography and later the play and film, "The Miracle Worker," presented Keller's life to the general public. These media productions are the first contact most able-bodied people have with deaf-blindness, and they colour the public's perceptions of deaf-blind people. For example, since Keller was totally deaf and blind, many people are surprised to meet a deaf-blind person who is partially sighted and has residual hearing. Actually, few people are completely deaf and blind.

Another misconception involves the need for assistance from able-bodied persons. Ann Sullivan's role in helping Keller, when she was a young child, control her behaviour and communicate using the manual alphabet is a classic story. Later, when Keller was ten, she wanted to learn to speak. This was generally thought to be impossible, but Keller learned by touching Sullivan's throat and lips while she spoke. When Keller attended college, Sullivan spelled the lectures into her hand, and, in all, Sullivan stayed by Keller's side for 50 years.

Because Keller was dependent on Sullivan, people today are surprised that few deaf-blind persons need companions. Using advanced mobility techniques, most can live independently and even travel freely. Rod MacDonald, for example, has logged over 320,000 km alone, including trips through Europe. According to him, "Deaf-blind people can live alone, hold a job, and travel to and from work. They marry, have families, and take part in sports and recreation activities — many things that Keller never had a chance to do."

Another deaf-blind person who believes that the Keller story sometimes misleads the public is Janice Den Hartog. "Everyone thinks that all deaf-blind children are wild, because Keller was wild in 'The Miracle Worker'. Also, it is generally thought that all deaf-blind people use the manual alphabet to communicate like Keller did. In my opinion, because of Keller, people over idolize the deaf-blind and we don't need that."

A graduate student in rehabilitation counselling, Den Hartog works in the interpreter training program at the Vocational Technical Institute in St. Paul, Minnesota. She was born deaf and gradually began losing her vision at the age of 15. When she was 20, she had some vision left but was legally blind.

"I don't know if I was inspired by Keller," Den Hartog remarked. "It was my high motivation to go on and neither complain about my blindness nor look back. Complaining gets you nowhere."

"Sometimes, people asked me if I am aware of Helen Keller. I reply that I am not Keller. I am Janice Den Hartog and I am different. I am not a second Keller."

Arthur Reohrig, director of Hearing Vision Impaired Programs at Gallaudet College,

Washington, D.C., said that the Keller saga encourages some deaf-blind people to see themselves unrealistically. "When deaf-blind people live alone and far apart from each other," he stated, "everyone sees them as prodigies. They are given a lot of praise and often think they are another Keller. When they meet other deaf-blind persons, they are often surprised to find their peers just as intelligent — and maybe even more so."

Roehrig communicates using hands-on-hands sign language, and when speaking to hearing people, he uses a voice interpreter. "Many people mistakenly believe that a deaf-blind person understands another person only by touching the mouth of the speaker and feeling puffs of air on a finger tip. This is called the Tadoma method. But 99 percent of deaf-blind persons don't use this method.

"Also, stories written about deaf-blind people usually portray those who can speak and suggest that this accomplishment shows how intelligent they are. But speaking is a matter of ability, not intelligence.

"When people hear about or meet a deaf-blind person, they feel sympathy and pity and say 'Oh, poor thing . . . . sorry.' When they hear about Helen Keller, they say 'Wow-great-wonderful!' There's a strong contradiction there, and I think the media should show other deaf-blind people besides Keller.

"I never thought of comparing myself to Keller. We have different backgrounds. She lost both vision and hearing when she was young. In a more modern era, I was born deaf and lost my vision later in life. Still, some people make comparisons, like one person who told me it was too bad I couldn't become famous because Keller was born before me. But I prefer being me and nothing else."

Another person who wants to be seen realistically is Isaac Obie, who lost his sight and hearing at the age of three. His residual hearing allows him to use a telephone equipped with an amplified earpiece. He teaches blind people independent living skills.

"People asked me, 'Do you think you will be able to do what Keller did? I say no, because she's Helen and I'm Isaac. But Keller showed that we educators have a job to teach people to live independently. She showed us that we could do that job. That's something I always keep in mind as a teacher."

Rod MacDonald also works as an educator. An employee of the U.S. Department of Labor and a computer specialist, MacDonald has been setting up a computer training center for deaf-blind students at Ohlone College in California. According to MacDonald, students at Ohlone think of Keller in the same way that most students think of George Washington. "She is someone in the past who is not directly related to them," he explained.

When asked how the story of Helen Keller affects employer attitudes to deaf-blind job applicants, MacDonald replied, "In some ways it could be a problem. Keller was highly intelligent, and most of my students are not at that level, nor should they be. Not all deaf-blind people can be as brilliant as Keller, you're asking for too much."

"Intellectually, Keller has probably never been surpassed. But there are many other areas in which deaf-blind people have become proficient. While she could speak and be understood, her speech was never easy to understand. There are deaf-blind people who have done better, and there are better techniques today for teaching speech to deaf-blind children.

"Opportunities and resources were not there at the turn of the century. What was impossible for Keller is possible for deaf-blind people today. For example, she graduated from college in 1904 before women even had the vote. As late as 1950 only two deaf-blind people graduated from college. But in 1977, 30 deaf-blind people were attending college.

"Keller opened doors. But she never had a job, except for public speaking. At that time, there was no real employment possibility, except, of course, in sheltered work-shops. Most deaf-blind people, even 10 to 15 years ago, worked in a sheltered workshop.

Times have changed; it's a different era. I am a full-time professional, have a master's degree, and am working on a doctorate. This would have been unthinkable in Keller's time.

"To me, Keller's accomplishments helped cut down the first trees in the forest. She proved that trees could be cut down. Now we have a pathway through the forest made by the trees she cut down."

Aslaug Haviland sees herself following the pathway blazed by Keller. Age 68, Haviland emigrated to United States from Norway and is the first deaf-blind person to become

an American citizen.

"When I first came to this country," she said, "I didn't understand one word of English. But I thought if Helen Keller could do it, I could do it, too. She had to learn to speak and understand English, a language that she had never heard. I never heard English in my life, and now I can speak and understand it."

Haviland learned to read English in braille at the Hadley School of the Blind New York. To learn how to speak English, she placed her hands lightly on the throats of friends as they spoke. Another resource was written communications from friends. "Some people in America spell words the way you say them," she explained. "Their mis-spellings in the manual alphabet and in braille told me how to pronounce words correctly. I learned English from poor spellers!"

"I'm proud to be a housewife," Haviland declared. "I never go out and make ready-made food. I always make my own. I'm a little old-fashioned, but healthy and happy."

"Helen Keller influenced me with her courage, and she showed that where there's a will, there's a way. However, I feel there are many Keller's among deaf-blind people today, and I wish that more attention would be paid to them, too."

Data base on computer aids for the visually impaired

The Baruch College Computer Center for the Visually Impaired in New York, with financial assistance from the US Division of Manpower Development of the Rehabilitation Services Administration, works on a training programme to improve the quality of professional placement services for blind and visually impaired persons. A product of this work was the generation of a list of manufacturers of computer aids for the visually impaired, which grew into a comprehensive data base on such computer aids.

The College is constantly working to update and upgrade the data base. To this end, it maintains close contacts with other institutions, such as the Warwick Institute for the Blind in England, and invites manufacturers and clients to provide additional information and corrections. The data base also includes a listing of commercially available equipment and software which are applicable to blind users, even though they are not specifically designed for them.

Requests for additional information can be addressed to:

Baruch College Computer Center for the Visually Impaired
Box 515
17 Lexington Avenue
New York, New York 10010
USA.

BRAILLE MICROCOMPUTER SYSTEM

By Dr. J. M. Gill, United Kingdom
Warwick Research Unit for the Blind

BITS

The Braille and Ink-print Text-processing System (BITS) enables a typist with no knowledge of braille to produce documents in both ink print and contracted braille to produce documents in both ink print and contracted braille from a single typing operation. The applications include agendas of meetings, lecture notes, and correspondence from banks to their blind customers.

The basic system consists of a microcomputer, printer and braille embosser. The typist inputs the text on a conventional keyboard, and can easily correct any typing errors. The machine can be instructed to print any number of sighted copies at 45 characters per second. Also facilities are provided for personalising multiple-copy letters and producing self-adhesive address labels.

To produce the information in contracted braille, the typist just types BRAILLE and the number of braille copies required. The machine will automatically produce the braille copies on the embosser at speeds from 15 to 200 braille cells per second (the speed depends on the embosser used).

As well as producing the braille embossed on paper, the system can generate tapes for paperless braille systems such as the Digicassette or Versabraille.

BITS is now being used by a school for the blind, a trade union and an organisation for the deaf-blind.

Prestel

Deaf-blind people are severely restricted in their access to information including the news and weather forecast. A system has been developed to permit output from the Prestel viewdata system in contracted braille.

Prestel is an information system which normally displays information on a modified television receiver with the data transmitted over a telephone line. There are about 180,000 pages of information on the system.

Prestel has other potential applications for the deaf-blind since it is a two-way system. For instance a system has been developed for sending messages between two users; this was developed for the deaf but it could also be used by the deaf-blind who read braille.

Although Prestel is a British system, many European countries have similar system which can be of great assistance to the deaf-blind and the blind.

ANSWERS TO TRICK OR TREAT

1. The word is HEROINE.

2. Because it saw the salad dressing.

3. The word "wrongly' is always pronounced 'wrongly'!

4. 1881 and 1961.

5. Eight Days. On the eighth day the frog climbs three metres and reaches the top of the well; he is out.

OFFER OF VOLUNTARY HELP

THE SINGAPORE ASSOCIATION FOR THE BLIND

PERSONAL PARTICULARS OF VOLUNTEERS

Name: Dr./Mr./Mrs./Miss: _____

Name in Chinese Characters: _____

Address: _____

_____

Telephone No: (Office) _____ (Home) _____

NRIC No: _____ Occupation: _____

Age: _____ Nationality: _____

Standard of Education Attained: _____

_____

Languages/Dialects Spoken: _____

_____

Particularly interested in helping with:
(Please mark with an X your particular interest)

a) Appeals (Fund-raising) ( )

b) Reading Service ( )

c) School (Music, Craftwork, etc.) ( )

d) Design/Artwork of Special Projects ( )

e) Others (Please specify) _____

_____ ( )

Days and time which help can be given _____

_____

Remarks _____

_____

_____ _____

Date Signature

FOR OFFICE USE

He/She has been registered as a volunteer on _____

He/She is assigned to _____ Dept./Section.

Application has been acknowledged on _____

_____

Executive-in-Charge

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If you are already a volunteer worker now, pass this form on to another interested friend.

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reading this magazine,

PASS IT ON!

Let your friends be acquainted
with us and we look forward
to getting to know them too.

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PASS IT ON!

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with us and we look forward
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The WHITE CANE

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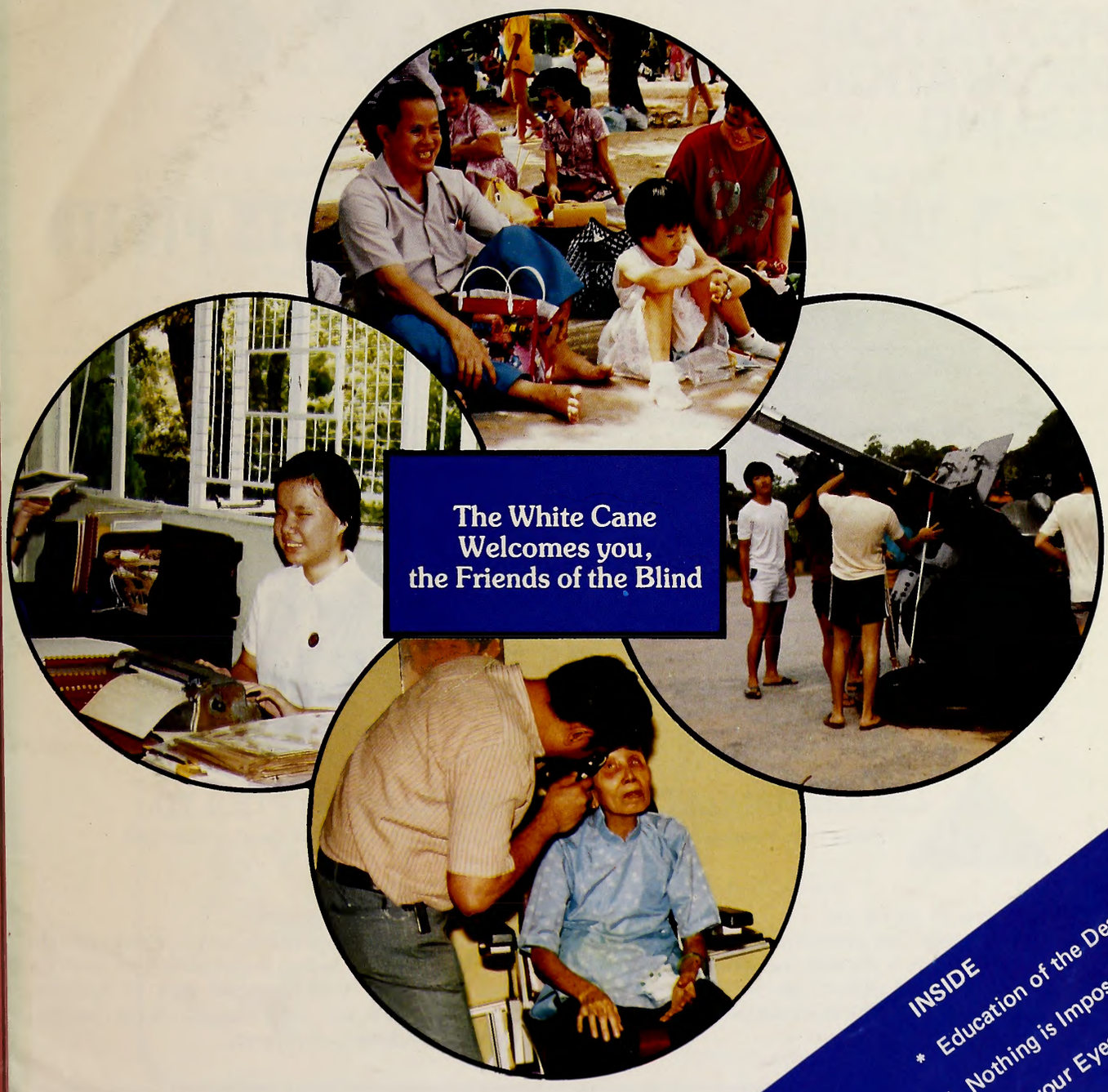

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the Friends of the Blind

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* Nothing is Impossible
* For your Eyes Only
* Live to 101 years

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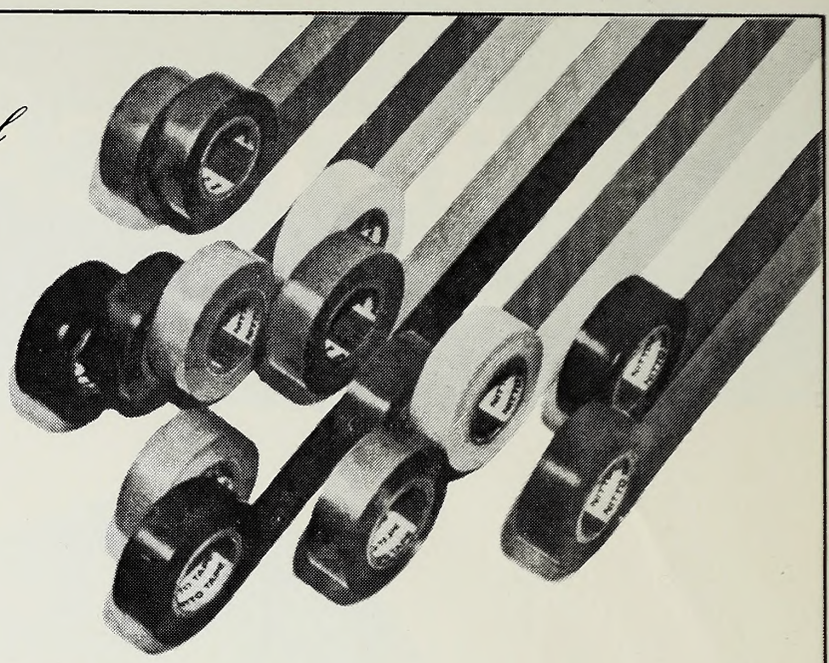

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(This magazine is the voice of the Singapore Association for the Blind and is distributed free to all friends and public centres. Cover photo shows, clock wise from top, outing to Sentosa, another outing to Sentosa, Low Vision Clinic Session in progress & education in the School for the Blind.)

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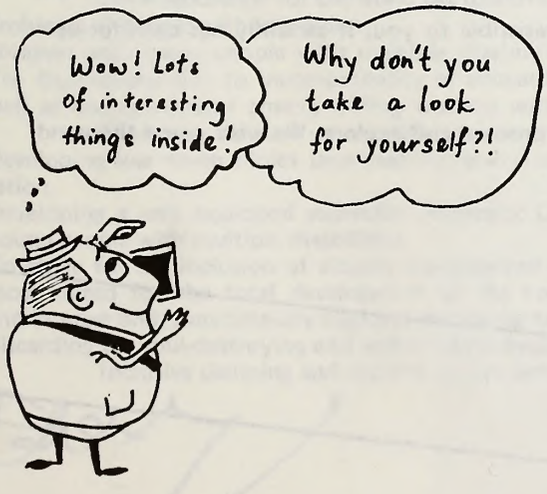

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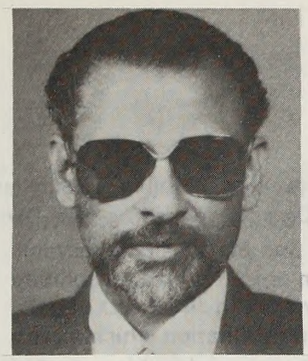
Editorial..

Hi Readers!

Welcome to this annual edition of The White Cane. Do not put down this magazine until you have found something in this magazine that thrills you. If you are first time with us, you may be excited to find out that the coin you dropped into the donation tin and the thoughts you spared for the blind are enabling them to help themselves—academically, emotionally, socially, physically and vocationally. Information on colour-blindness and cataract are meant to dispel your fears when you come face to face with them. Other articles include "Helping in Crisis" and "Live Up To 101 Years!" Also, vivid illustrations through photographs and cartoons shall add much to pages of your pleasant memories. If these do not interest you yet, then jokes, riddles and teasers are bound to tickle you. Do not resist them.

Indeed, this magazine will not only inform you of the blind, the Association and her activities but it hopes to serve you by giving you pleasant reading material. If this magazine does not prove irresistible to you, it certainly has been for us—to produce this magazine.

Well, why are you waiting? Please proceed and explore. We wish you a thousand and one happy moments of reading!



MR. RON CHANDRAN- DUDLEY
PRESIDENT OF
THE SINGAPORE ASSOCIATION FOR THE BLIND

PRESIDENT'S ADDRESS

Progress With Singapore

Reflecting on the thirty-three years on the founding of the Singapore Association for the Blind, and more particularly, on the last twenty-five years of Singapore's nation building, I feel that the association can proudly say that on its part, it has held its own by providing meaningful services to the visually handicapped people in the Republic. Our gratitude goes to the many thousands of volunteers for their selfless service and, to our well-wishers for their unstinting support over these years that has made this possible.

What will be our direction over the next twenty-five years which will culminate in the association providing relevant and up-dated services in the first decade of the 21st century? Central to our planning will be the concept of **Total Community-Based Service** provision, that is to say, the emphasis has to be on the visually handicapped individual as a member of the community. The association then, will not only have to prepare the visually handicapped person to shoulder his/her responsibilities to the community, but it will also have to convince politicians, planners, civil servants, captains of industry and commerce, and men, women and children in the community, of the worth of a visually handicapped citizen.

Total acceptance will be the key note that shall resound over the next twenty-five years.

Total defence is no defence if we do not have strong and committed total manpower mobilisation or, shall I say, **total anthropower mobilisation,** and development. Anthropower (people-power) is meaningless if we do not include every individual in our republic. Therefore, the visually handicapped and other disabled citizens must also be given the opportunity to be part of this anthropower base.

Total anthropower mobilisation and development is the strategy for **total defence** for all by the year 2000.

The visually handicapped members have struggled successfully, within the constitution of the Singapore Association for the Blind, to attain equal and full participation at all levels of activity within the association. In the process of attaining this, the visually handicapped members have recognised the value of team approach. The members of the staff, the non-visually handicapped members of the association, and the visually handicapped members as well, have gelled together to strive towards a better life for all.

Solidarity in service is the indubitable path towards the year 2000 and beyond.

The Association for the Blind has identified three major areas of concern:

1. Problems of people with low vision.
2. Children and young people with multiple disabilities (disabilities in addition to visual handicap).
3. The frustrations due to incompatibility of education and limited non-stimulating employment, as well as unemployment among willing workers with disabilities amidst national full employment.

Therefore, we have set our sights to meeting these challenges, through:

a. Developing low vision clinics (and mass screening) and centres for low vision education and rehabilitation.
b. Developing a well equipped scientific Diagnostic Centre and training programme for children and young people with multiple disabilities.
c. To strive for the inclusion of visually handicapped children into regular kindergartens and schools most suited for the total development of the young person to his/her full capacity, capability and interest and, punctiliously explore new and up-to-date avenues of open and gainful employment, discarding the soul-destroying and archaic stereotyped crafts and jobs.

Inclusive planning and decisive action determine our progress with Singapore.

RON CHANDRAN–DUDLEY

ACTIVITIES THIS YEAR

Introduction

The Singapore Association for the Blind (S.A.B. for short) was founded on 6 Nov 1951 by a Scottish Colonel called G A P Sutherland. Standing at 33 years old, it is actually one of the first charitable organisations set up under the old Colonial Government. Since then, its main objective is to rehabilitate the blind in Singapore, "restoring each to his maximum level of ability and welfare in all aspects of daily life". The following pages will highlight the activities of S.A.B. in its role of rehabilitation which means, in the words of the World Health Organization, the "process by which a person reaches his potential in social, educational, vocational and medical areas".

EDUCATION

In the School for the Blind, where pre-primary and primary education is provided, a totally blind child can learn to read and write using Braille. A girl is seen here "writing" with a Perkins Brailler.

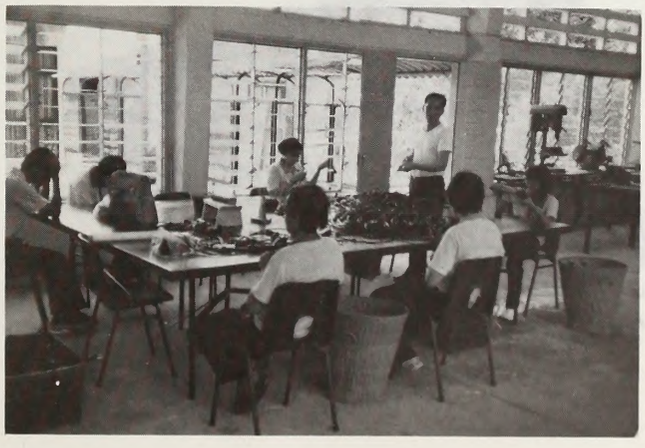
Music lessons are conducted. A child is seen here playing a tune for the teachers on Teacher's Day.

A physical education class in progress.

The school children enjoying the "choo-choo" train on School Sports Day.

"Enjoy Your Book" Quiz organized by the S A B library to test the students' knowledge.

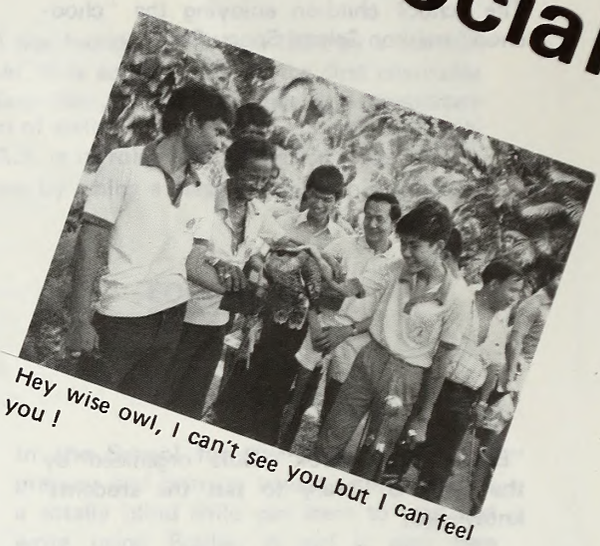
Enjoying the morning news-reading by Mrs Row



Contract work – part of I.T.C. programmes for the trainees.

Social

At Sentosa . . . a canyon ride to outer space

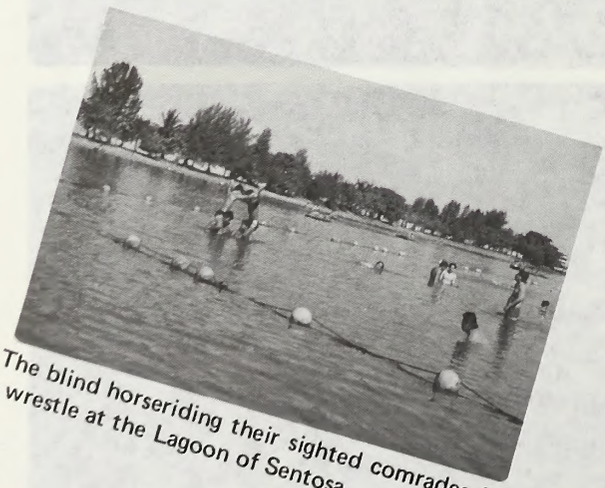


Hey wise owl, I can't see you but I can feel you !

No more space for you, Mr Ngiam (Jurong Bird Park)

Looking the

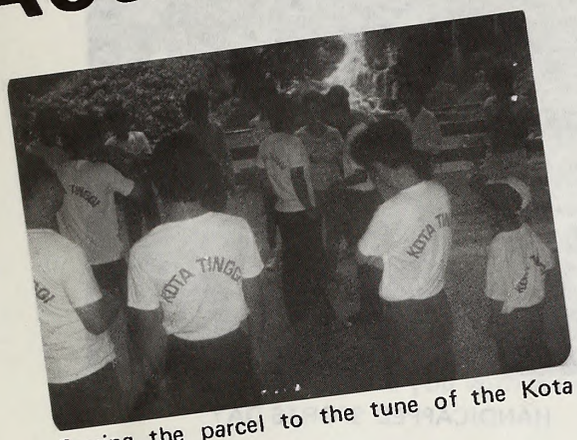
All smiles for a visit to the wonderful world of birds



The blind horseriding their sighted comrades for a wrestle at the Lagoon of Sentosa

You have touched the "nose" of the aeroplane

Activities



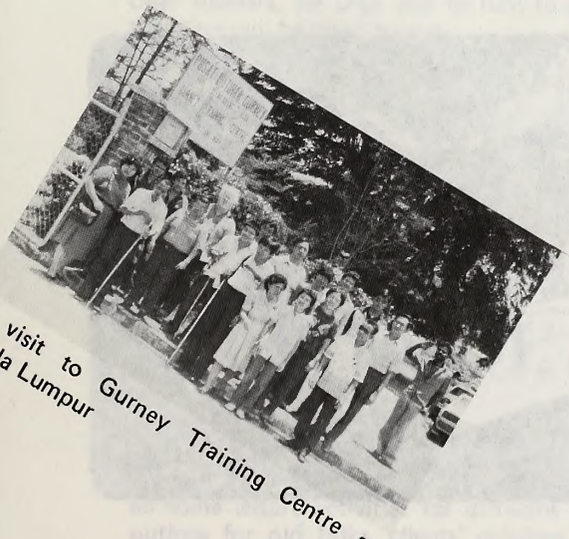
Passing the parcel to the tune of the Kota Tinggi Waterfalls

Hands up, everyone . . . for fresh air

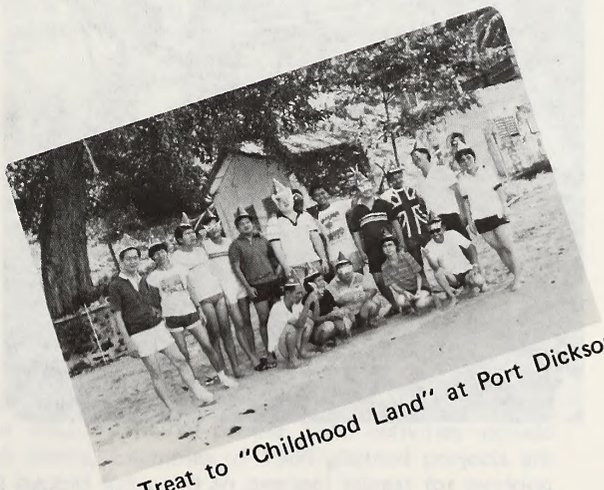
At World....

We made it to the Top of Genting Highlands

At Malacca . . . time ticking away while we pose



A visit to Gurney Training Centre at Kuala Lumpur



A Treat to "Childhood Land" at Port Dickson

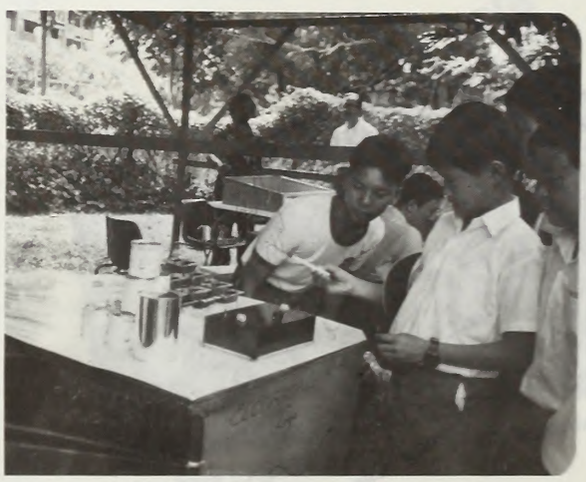
OTHER ACTIVITIES

OLD FOLKS' PARTY

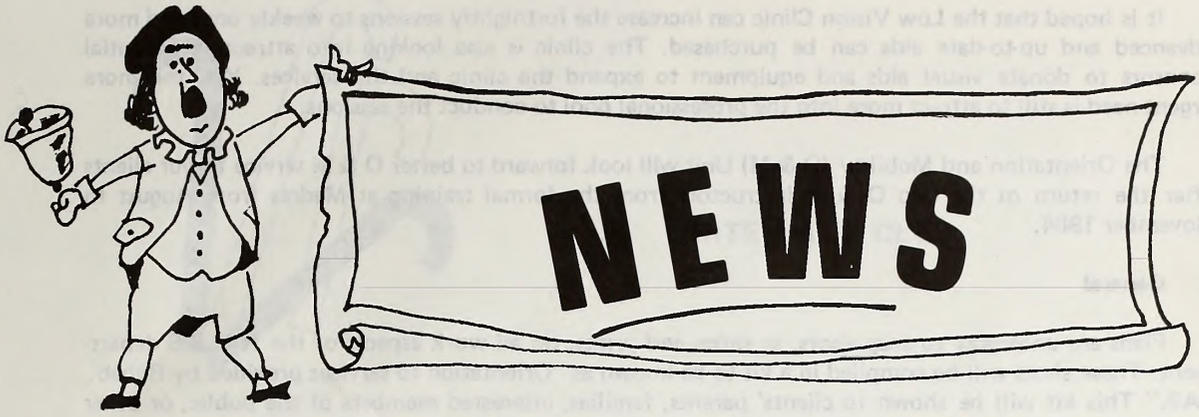
HANDICAPPED SPORTS DAY

PONY RIDE

SCHOOL OPEN HOUSE EXHIBITION



SAB FUN DAY



It is timely to update you with some news of S.A.B. since we left you in the last edition.

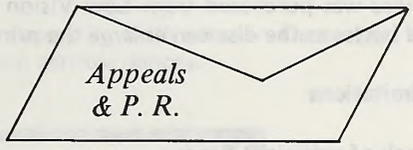
Staff Matters

It is our deep regret that two long service members of the staff have resigned from the association this year.

a. Mrs P.E. Sabapathy. She has been with us for 25 years.
b. Mrs. K. H. Ng, who joined us since 1969.

We thanked them for their many years of dedicated service to the association. We wish them the very best in the years ahead.

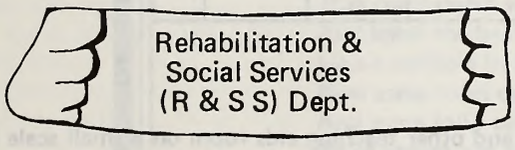
From the Appeals and Public Relations Department



SAB is not yet absorbed by the Community Chest. We hope that Community Chest will soon accept us. As we stand now, our financial position will show that we are in deficit of $100,000 by the end of this year (1984) for our operating expenses incurred.

Dear Readers, we urge you to turn to pg 44 to consider how you can help. The continual services to the blind will be owed to you.

Yet, it is our joy to say thank you to all our dear friends - sponsors, volunteers and supporters - who have not left us alone. We know we can continue to rely on your support, because you CARE. Thank you.



What's going on in the R & S S?

1. Activities

The Social Welfare Unit of the Rehabilitation and Social Services (R & S S) Department has organised some leisure activities for different groups of the visuallyimpaired people. Such activities include outings for old folks, clients' children, home-bound clients. Examples of 1984 planned projects are a trip to Sentosa for clients' children; outdoor party for old folks and an overseas retreat for working adult clients.

It is hoped that the Low Vision Clinic can increase the fortnightly sessions to weekly ones and more advanced and up-to-date aids can be purchased. The clinic is also looking into attracting potential sponsors to donate visual aids and equipment to expand the clinic and the services. Yet, the more urgent need is still to attract more into the professional pool to conduct the sessions.

The Orientation and Mobility (O & M) Unit will look forward to better O & M service to our clients after the return of the two O & M instructors from the formal training at Madras from August to November 1984.

2. General

Plans are underway to snap shots, in slides and prints, on all work aspects of the R & S S department. These shots will be compiled in a kit to be known as "Orientation to services provided by Rehab., SAB." This kit will be shown to clients' parents, families, interested members of the public, or other visitors to SAB. It can also be used in exhibitions and seminars too.

3. Optacon Training

The above training programme was revived on 3rd October 1983 with the objective of training potential blind staff in S.A.B. so that they could make use of the machine to read print. It is hopeful that by the end of 1984, those staff members who are eligible for the training would have completed the course and then be able to use the optacon to read independently.

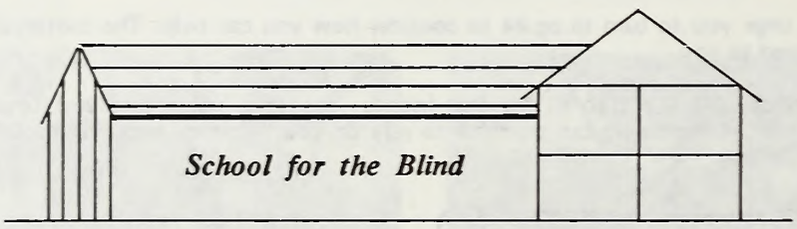
4. Computer Course

Currently, two partially blind clients who have been awarded the 1983 MTC Compucentre scholarships in computer programming, are completing the course very soon.

It is hoped that they could be placed in a computing firm after completing the course. A magnicomp disc was purchased from Low Vision International in Sweden, to enable one of the two students to read better as the disc can enlarge the printed words to 4 times the original size.

5. Limitations

a. Lack of sufficient funds.
b. Lack of sufficient manpower with related formal training in rehabilitation.



School for the Blind

The School for the Blind has started an audio visual and other teaching aids room on a small scale in the beginning of September this year. The budget estimated for hardware, software, storage and some very minor renovations was $10,000. Equipment required include a film projector, a television, video, a special screen for rear projection, transparencies, slides, tapes and cassette recorders (for the teaching of sciences, mathematics, and English) and a few sets of film strips. Each set costs around $400.

Our first donor come from THE STARS. In conjunction with the United World College, THE STARS staged a play called "The Miracle Worker". Presently, we have raised about $2,100, leaving a balance of about $8,000. We would like to say a word of thanks to our contributors.

We are very grateful to them and we hope that more people would come forward to help us.

WHITE CANE CLUB

Vending Machines

Sometime this year, the club maintains the running of 2 drinks vending machines in SAB. Cold drinks of various sorts are now ever ready to quench your thirst.

Crochet Class

The first Crochet class was started in September with 5 students learning under Miss Loh Soh Khuan.

Cookery Classes

These classes were conducted in September and October by an associate member, Mrs. Patricia Chng. Four students in the first class did Laksa and eight had "Fish Otak" in the second.

Aerobics Exercises

Miss Irene Wee, an associate member, will be conducting classes for both sexes in December. You will soon have the chance to see the visually handicapped perform aerobic dances.

Not By Chance Nor Happenstance

Into our lives come many things
To break the dull routine,
The things we had not planned on
That happen unforeseen,
The unexpected little joys
That are scattered on our way,
The unplanned sudden meeting
That comes with sweet surprise
And lights the heart with happiness
Like a rainbow in the skies . . .
Now some folks call it fickle fate
And some folks call it chance,
While others just accept it
As a pleasant happenstance —
But no matter what you call it,
It didn't come without design,
For all our lives are fashioned
By the hand that is divine.

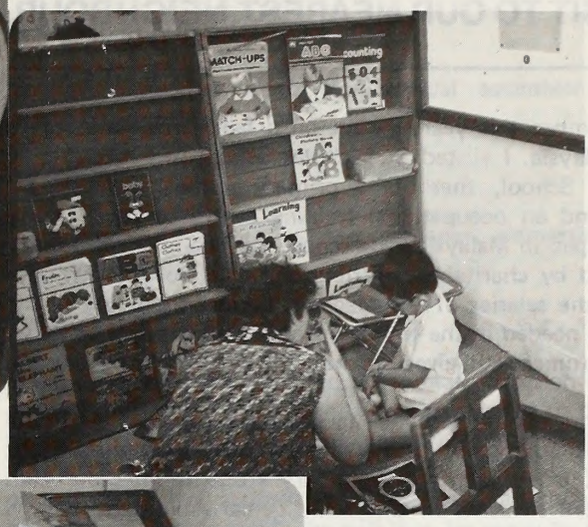
Helen Steiner Rice

EDUCATION FOR THE DEAF – BLIND

During the period 1983 to early 1984, five children with hearing impairment were admitted to St Andrew's Pre-school for hearing impaired children. However these children were unable to cope with or participate in the programme. It was discovered that these children whose eyes look normal, were also visually handicapped. The visual impairment had hindered them from learning the deaf sign language in the usual way. Hence they stopped attending the classes and chances of education for them seemed bleak.

It was not long later that the Singapore Association for the Deaf and the Singapore Association for the Blind came together to look into ways of helping these children. The result of this joint effort was the launching of a pilot project at the School for the Blind in April 1984. Under the dynamic enthusiasm of five volunteers: Mrs Joan Wong, Rena Chandran-Dudley, Mary Sweeting, Patricia Hartigan and Maureen Gaye, the challenge to educate these children and better their lives began. A programme for six months was planned. This programme involved both parents and children. They come twice weekly for three hours. In each session the parents got to learn the skills of communication which will enable them to communicate with their deaf blind children at home. The group was helped by Mr Bob Maclaine, a specialist in sign language. Presently a speech therapist is also helping the group with speech exercises.

A Glimpse into the class. . . .



. . . . Note the one-to-one attention given.

This is just a pilot project. The expertise in this field is limited. We hope that a formal educational programme can soon be instituted for all children who are deaf and blind. If you have any related expertise, do not hesitate to come forward to help.

Mrs N Row
Teacher
School for the Blind

A VISIT TO OUR NEAREST NEIGHBOUR

In September this year, I went on a familiarization tour to West Malaysia. I visited St Nicholas School in Penang. In St Nicholas School, there is a primary school, a residential service and an occupational training centre for the visually handicapped in Malaysia. The school is funded by the Government and by charitable contributions. The Government pays 90% of the salaries of the teachers, besides supplying all the materials needed in the training programme. On top of these, the Government still gives a grant of $200 per child per annum.

Integration of the visually handicapped students with the sighted is commonly practised and encouraged throughout Malaysia. In Penang, the secondary students integrate with the sighted students in the Tuan Zainal Abidin School. In Kedah too, and in Kuala Lumpur, integration takes place both in the primary and in the secondary school. In Malaysia, the visually handicapped students are very well catered for. In schools where integration takes place, there is a special resource room where all materials (braille text and resource books) and Perkins braillers are supplied. Resource teachers are attached to cater specially to the visually handicapped students. They do not teach in the normal classes; they remain in the resource room so that the students can come for extra tuition or help at any time. The teacher to student ratio is 1:7.

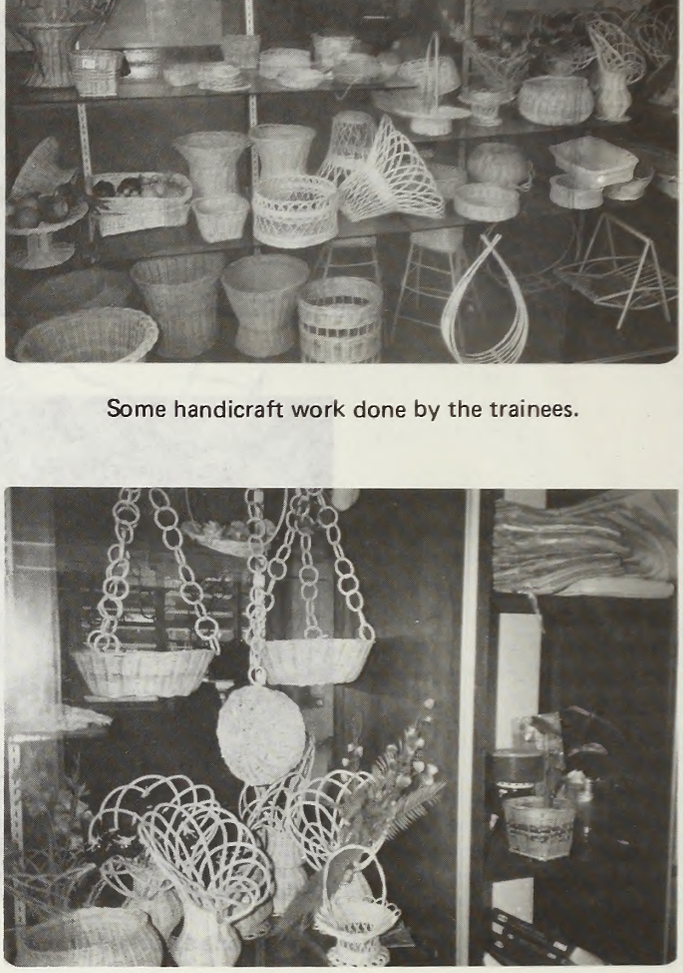
Apart from the annual per capita grant for the schools, the students in Form Five and Lower Six are given an additional budget to engage part-time readers if the need arises. With all the support and encouragement from the Government, it is little wonder that Malaysia has produced many visually handicapped graduates.

In a vocational training course, skills such as mobility and orientation, daily living skills, housework, cooking, farming and handicraft work are taught as well.

The Malayan Association for the Blind (M.A.B.), the headquarters of which in Kuala Lumpur, runs a primary school and residential service in Johore Bahru. Here, as in Penang, the school is supported one hundred percent by the Government. The M.A.B. also runs a training centre known as the Gurney Training Centre. Here, apart from the mobility skills, training in the areas of woodwork, telephony, braille, typing, stenography and even massage are conducted.

It is encouraging to note that many of those who have gone through the training has found employment in the Government departments and some in the private sector.

Some handicraft work done by the trainees.



In short, the M.A.B. has all the support it needs from the Government in the areas of annual student grant, specially trained teachers from the education ministry and generous supply of teaching aids which are essential in the rehabilitation process of the blind. I hope that S.A.B. will one day be in the same position. S.A.B. can then concentrate fully on rehabilitation services for the blind.

—Mrs Hazel Lee
Asst Director (Education)

WORK AND VOCATIONAL TRAINING

If you are a new friend of the blind, some of the questions uppermost on your mind may be:

1. Do the blind work?
2. What can they work as since they cannot see?
3. How are they trained?

The answer to the first question is fairly obvious. Just as everybody desires to be gainfully employed, the blind are no different in their desire to contribute to productive work and earn a living. Most of the blind do work whenever an opportunity knocks. In most cases, they are reported to be more conscientious and cautious in their jobs and employers who employ them are often pleased with their performance. Furthermore, the pre-vocation training, on the job training, orientation and mobility training and even solving problems at work are undertaken by the Singapore Association for the blind, with minimum consultation with the employer.

What can the blind work as? Today, the visually handicapped are employed in a wide variety of positions such as:

PROFESSIONALS

Counsellor, Musician, Rehabilitation Worker and Teacher

SALES AND ADMINISTRATIVE LINE

Executive Officer, Librarian and Salesman

CLERICAL STAFF

Stenographer, Clerk, receptionist, storeman and telephone operator

TECHNICAL/PRODUCTION LINE

Machine Operator, electronic/electrical assembler, packer and factory worker

OTHERS

Disc Jockey, labourer, waiter, gardener, domestic helper, peon and homeworker.

Vocational training

When the blind has completed his formal education in school or when he reaches the age of 15, he is referred to the Industrial Training Centre at the association. The training extends over a period of about two years where the trainee is assessed on his dexterity, attitude towards work and capability. If he is found to be suitable, he will then be ready to be placed in open employment. The course in the training centre include canework, woodwork, physical education, moral education, news–reading and recreational activities. Classes in braille, braille shorthand and skills of daily living are also conducted. For those who qualify, telephone training is also available.

When the trainee is assessed as ready for employment, the placement officer will explore job opportunities for him. On-the-job training and follow-up are provided when a job is found. Orientation and mobility instructors will train him in travelling from one place to another by using the remaining senses of hearing, touch, or even smell.

HAPPINESS SPREAD

2 heaping cups of patience
1 heart full of love
2 handfuls of generosity
Add a dash of laughter, a full cup
of undersaanding and 2 cups of loyalty.
Mix well and sprinkle with kindness.
Spread this irresistible delicacy over a
lifetime and serve eveyone you meet.

LET THE BLIND HELP YOU

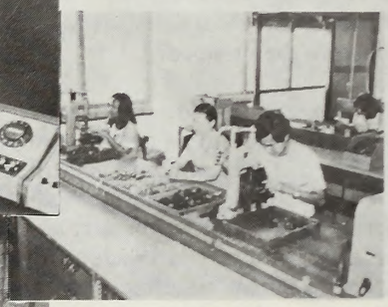
WHY SHOULD EMPLOYERS HIRE BLIND PEOPLE?

The question is not why, but why not! If they are capable and conscientious; and can fit into the daily routine and scheme of things–why not?

YOU CAN HELP THEM ACHIEVE INDEPENDENCE

The Singapore Association for the Blind provides vocational training to visually handicapped people so that they can be employed in an open environment. This would enable them to lead an independent life and contribute effectively to the society. As an employer, you can help them achieve independence by employing them.

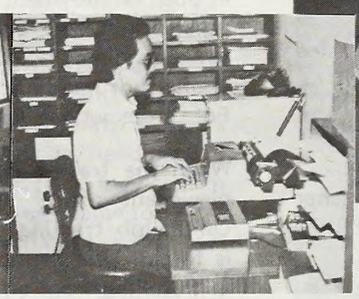
TELEPHONE OPERATOR



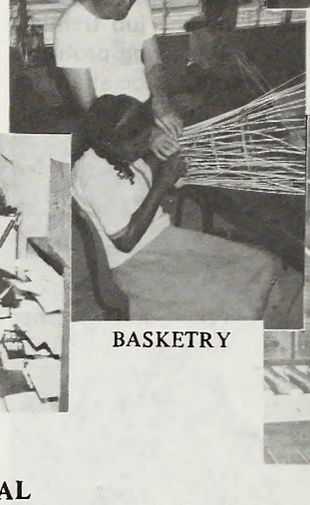
PRODUCTION WORKERS

THE BLIND ARE CAPABLE OF EMPLOYMENT

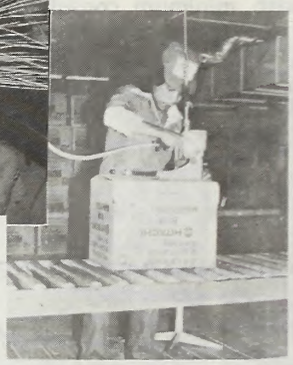
ON-THE-JOB TRAINING ATTENDED BY PLACEMENT OFFICER



STENOGRAPHER



BASKETRY



PACKER

APPEAL

If a visually handicapped person can perform just as well as a normal person, why not give him a chance to prove himself? By employing him, you are not only helping him but also yourself at this time when getting the right people especially production workers to work for you is not easy.

To: Executive Director
Singapore Association for the Blind
47 Toa Payoh Rise
Singapore 1129
Tel: 2514331/4

I am considering the possibility of employing a visually handicapped person.

☐ Please send me more information
☐ Please contact me for a discussion

NAME: _____

DESIGNATION: _____

ORGANISATION: _____

NATURE OF BUSINESS: _____

ADDRESS: _____ TEL: _____

LIKELY JOBS AVAILABLE: _____

_____

WORKING WITH THE BLIND

It is not uncommon that a member of the staff is asked, "How is work with the blind like? What do you do? Do you enjoy your job?" etc. To answer to these, this edition personality spotlight is on Mr Ho Cham Hing, the vocational instructor who has worked for 27 years.

Mr Ho Cham Hing, 57, has been a member of the staff since 1957. He is truly the oldest vocational instructor, not only in terms of age but also in terms of length of service with the Industrial Training Centre (ITC).

How he came to work in S.A.B. was the introduction of a friend who happened to be the principal at the School for the Blind. At that time, it puzzled him as to how a blind could be trained. The idea of training the blind for a vocation posed a great challenge and he decided to take it up.

So on the 15 Jan 1957, a memorable day for him, he came to ITC as the pioneer vocational instructor ready to give his services for the training of the visually handicapped. He has now served 27 years and has never regretted the day he stepped in.

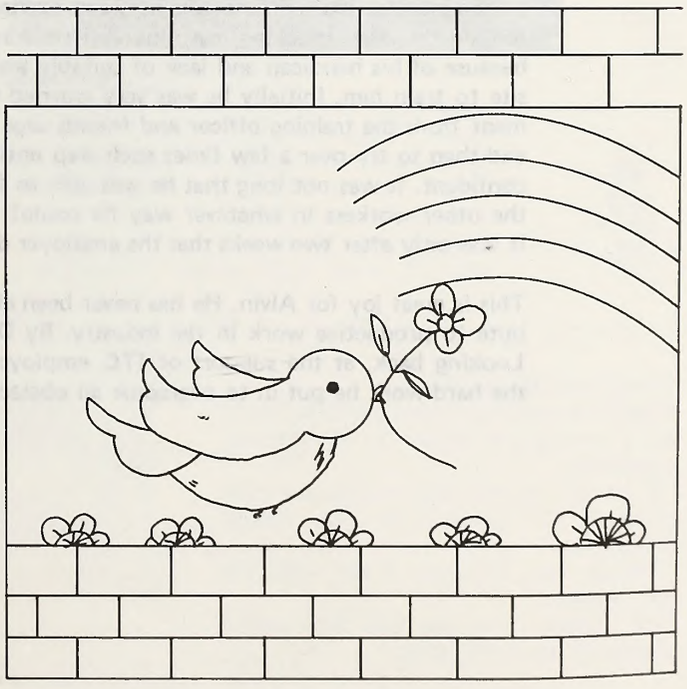
When asked of the motivation that sustained him all these years, he gave a broad smile, reflecting his job satisfaction as well as his winning formula in getting over some of the low moments. Top in his motivation list is his joy of being in a meaningful and purposeful life-long vocation. The job has taught him to understand the visually handicapped, their feelings and behaviour and has given him a valuable insight into another side of life. Immense satisfaction is also felt as he came to see himself to be more patient, more senstive to the needs of others as well as to be more caring. It has helped him, he claimed without doubt, in his personality development in more ways than one.

The job has taught him to understand the visually handicapped, their feelings and behaviour and has given him a valuable insight into another side of life.

Truly he has no regrets. If there is any at all, then it is the regret that he is getting old. However he is still young at heart and physically as fit as most middle-aged man. One can easily spot him as the man who conducts the P.E. lessons, running around with a first aid box during outings, leading the blind around, practising Tai-Chi martial arts before the day starts and playing badminton at the end of a day's work. He hopes to continue to work with the blind for many more years to come, as long as he is able to. He even hoped to further upgrade his skills. He regretted that in the past 27 years, the skills he has been training the blind for remain basically the same. If resources permit in the near future, he hopes to go abroad to learn from the neighbouring countries fresh skills or new ideas to train the blind.

He has no real regrets in working with the blind. If working with the visually handicapped should interest you further, do not hesitate to call in to speak to him or any of the staff in the association. You could be the next person to join our work force in bringing welfare and care for the visually handicapped, whether full-time or as a volunteer.

Mr Ho is seen here, running around with a first aid box . . .



NOTHING IS IMPOSSIBLE!!

Training a visually handicapped person for a job in open employment is no simple task. And to train one who is not only blind but has other handicaps as well, for a job in open employment has been considered impossible. But now, nothing is impossible, especially when Alvin Yeo, one of our multiple-handicapped trainees, made history by being successfully trained and placed in an open employment. This is how it happened . . .

Alvin, partially blind and multiple-handicapped, was referred to the Industrial Training Centre (ITC) for vocational training in 1976. At the end of the three years of training, he was found to be unsuitable even for basketry and carpentry work in the ITC. He was then transferred to the occupational workshop. In the workshop, he was trained to do simple work given on contract. Later, when the contract was discontinued, he was left with nothing to do. He merely reported to ITC daily.

It has been almost eight years that Alvin remain in ITC without any hope of open employment. But it was this year that things take a turn. The training officer has just returned from his training overseas. Looking into Alvin's situation, and applying what he has learnt, he saw the possibility for a multiple-handicapped like Alvin to be trained and placed in open employment. That would mean much specialized training. The training will require from Alvin a lot of determination, hard work and motivation as well as from a kind employer an opportunity to apply the training. Alvin himself is indeed very excited at the thought of being gainfully employed and he became very determined to give his best. He even told his friends that if given this chance, life is going to be different.

And then it happened! On 24 Feb 84, a kind employer gave Alvin the chance to start his first ever on-the-job training. With nervousness and excitement, Alvin was all set to give his best. His job involved folding of boxes, packing, carrying and stacking, skills which he has not been able to perform earlier because of his handicap and lack of suitable training. The training officer spent two weeks at the work site to train him. Initially he was very worried that he could not master the skills. But the encouragement from the training officer and friends urge him to keep trying. He was taught one step at a time, and then to try over a few times each step until he could master the skills. Gradually, he became more confident. It was not long that he was able to fold boxes, pack them and stack them. He even assisted the other workers in whatever way he could! The employer was very pleased with his performance. It was only after two weeks that the employer decided to take him in as an employee with the industry.

This is great joy for Alvin. He has never been able to do all these. But now he is glad that he can contribute to productive work in the industry. By December, he will already be in the job for ten months. Looking back, at the support of ITC, employer and friends which motivated him psychologically, and the hard work he put in to overcome all obstacles, he can truly declare that "Nothing is Impossible!!"

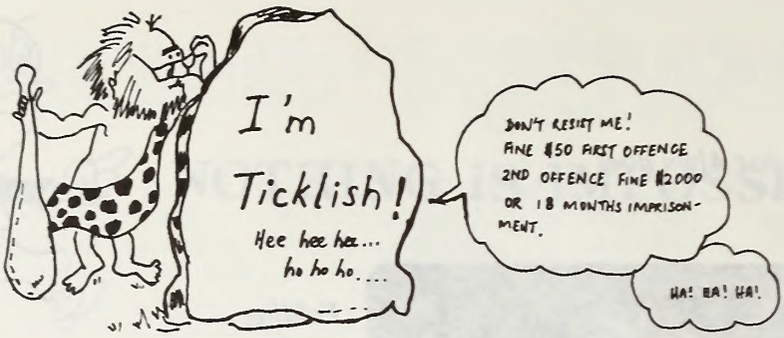
Industrial Training Centre

A glimpse into what Alvin does . . .

Folding .....

Packing

Assisting .....



QUIT SMOKING

An advertisement reads "I'd love to quit smoking. If you have vacancy for a job in a large gas station or a "highly explosive" working environment, please call the number below".

IN CASE I GET TIRED

The psychiatrist thougt it was very presumptous of the patient to lie down on the couch while waiting for him.
"You tired?" he asked, unable to hide his feelings.
"No"
"Then why are you lying down?"
"In case I get tired."

TAX PAYER

A taxpayer to the Income Tax Department Secretary, "Do you have anybody here who knows an honest face when he sees one?"

A PAIR OF SHOES

David: How much is that necklace?
Shopkeeper: Fifteen dollars.
David: Why, I could buy my wife a pair of shoes for that.
Shopkeeper: Yeah, but how would a pair of shoes look around her neck?

IN-HOUSE MARRIAGE

Reporters were responding enthusiastically to a company's report in an in-house newsletter,
"2 percent of our male employees have married 100 percent of our female employees."
"Excuse me, Sir, may I ask how did this happen?"
"Oh, simple. I've got 100 men and 2 women in my work force."

THIS HAT

"This hat makes you look ten years younger."
"How old are you?"
"Twenty-nine"
"I mean without the hat."

THAT'S A GUY

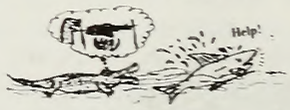
Mrs. Jones was driving her "freshie" daughter Serene to varsity one day, when she pointed to a long-haired jeans clad figure and asked, "Is that a gal or a guy?"
That's a guy," Serene replied.
"How can you be sure?"
"By the way my heart's beating."

DOING THE WORK OF 3 MEN

"I've worked here for eight years, "an employee said to his boss,
"and I've been doing the work of three men. I want a raise."
"I can't give you a raise," the boss answered, "but if you tell me who the other two men are, I'll fire them."

SHARKS

Peter and James went for a swim at a river one day. To check if the place was safe for swimming, they asked a boy who was fishing nearby,
"Any sharks here?"
"No," the boy answered
So they jumped into the river and started swimming. After several minutes, Peter called out to the boy,
"Are you very sure there's no sharks?"
"Of course! Sharks are afraid of alligators."



Heard of the Singapore First

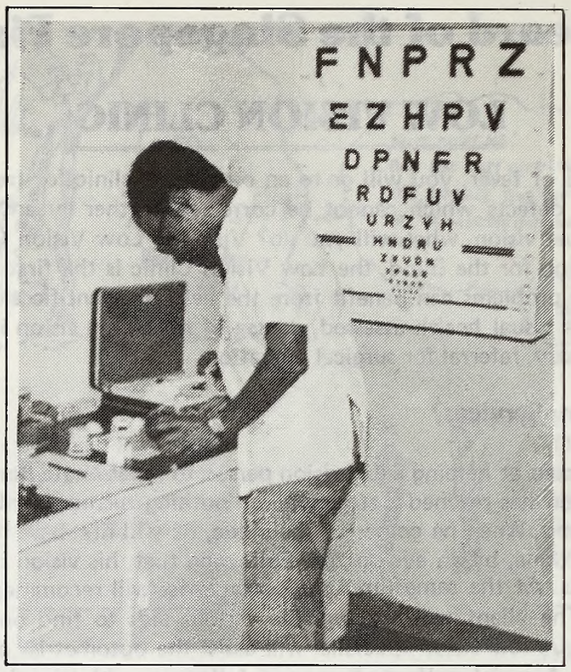
LOW VISION CLINIC

If you are down with flu or fever, you will go to an outpatient clinic for treatment. However, if you are having serious visual defects which cannot be corrected further by any known means, but you still maintain some residual vision, what will you do? Visit the Low Vision Clinic, of course. Located at the Singapore Association for the Blind, the Low Vision Clinic is the first clinic in Singapore where people with serious visual problems can benefit from the help of scientific aids. This is the only clinic where one can have one's visual health assessed, degree of remaining vision identified, low vision aids provided and where necessary, referral for surgical operation.

What Are Low Vision Services?

Low vision services are aimed at helping a low vision person to rehabilitate himself. A low vision person is one whose eye condition has reached a stage where "nothing further can be done", yet he still has residual vision to see around. When he comes to the clinic, he will first have his eye condition assessed, if it has not already been done, by an eye-doctor. Following that, his vision is tested with both distant and near visual test charts. At the same time, the optometrist will recommend suitable aids based on his visual performance. The client will try out the various aids to find one or a combination that gives him the best vision. A low vision specialist will assist the optometrist on training the low vision person on the use of aids. A social welfare officer will follow up with his other needs like social needs, educational needs, employment needs as well as orientation and mobility training, through appropriate referrals where necessary.

Client doing a near visual test after correction with high plus lenses.



Low vision Specialist laying out the various aids. Background is the distant test chart.

What Are Low Vision Aids?

Low vision aids come in two forms, optical and non-optical. Optical aids in the Low Vision Clinic helpful to a low vision patient include high plus lenses, magnifier, telescopic instrument, electronic magnifier (which can magnify up to 60 times). Other than these, a low vision person will also need other aids that will help him in his education or keeping up in his reading. These non-optical aids include reading stand, reading lamp, print-enlarging machine and thick lines exercise books.

Can Members of the Public Come to the Clinic?

When the Low Vision Clinic was first set up, it served only the registered clients of the Association. However, depending on availability of bookings, members of the public are now welcome as private patients. As bookings are required well in advance before one is placed for the fortnightly clinic sessions, clients of urgent cases are urged to see an eye-doctor (at the Singapore General Hospital or at a private practice) first. On coming to the clinic he can immediately be followed up with further low vision services.

Plans for the Clinic

Since its inception in 1978, the running of the Clinic has been helped by professionals from low vision clinics in other parts of the world, members (eye-doctor of the Singapore Society of Ophthalmology and members (optometrists) of the Singapore Contact Lens Society on a voluntary basis. As the clinic progresses, plans are underway to expand its services to serve more clients, have more sessions (instead of the present fortnightly ones), provide individualised training and follow up of each client and upgrade the quality of service to even higher professional standards. The greatest drawback is the lack of a sufficient pool of specialists to provide continuous professional service.

How You Can Help

You can help by volunteering yourself to be part of our professional pool. You can also help by referring any one needing help in low vision matters to the clinic. Appointments can be made with the Low Vision Clinic at 2514331 from Mondays to Fridays during office hours.

Social Welfare Officer
Low Vision Clinic

WHAT DO YOU KNOW ABOUT ALBINISM?

Albinism is an inherited autosomol recessive trait. It is not sex-linked, and the gene must be inherited from both parents, either of whom may be albinic or only a carrier of the trait. Albinism affects the metabolism of melanin, the pigment contained in hair and skin. In the fairer races, this results in milky or translucent skin and white or colorless hair. In the darker races, skin colour will vary from tan to pale, and hair colour from yellow to orange. The texture of hair is either coarser or finer than in non-albinic family members. Albinism also causes pigment deficiency in the retina, iris and choroid (the vascular coating that darkens the eye), causing the pupil to take on a deep reddish colour, and the iris to appear greyish blue or pink.

In many cases, the macula (the point of clearest vision at the centre of the retina) is poorly developed, limiting visual function and acuity to about 6/60, which is severe visual impairment and constitutes "legal blindness."

Another frequent result of albinism is nystagmus, or involuntary rapid movement of the eyeball. In addition, photophobia (abnormal intolerance to light) is often present. Consequently, many albinos have limited vision, but are able to read regular print with the aid of glasses, sun-glasses, or low-vision devices. A survey was conducted by a University in South Carolina to find out the attitudes and behaviour towards albinism.

ATTITUDES TOWARDS ALBINISM

A common attitude is that albinism is unattractive and therefore persons affected by it are "freaks" to be ridiculed. Some even thought that albinism is a disease. (It must be observed that many people do not understand the distinction between disease and condition or disability.) One respondent stated "It is a disease that is passed down—it looks strange." Other misconceptions and attitudes towards albinic persons include:

1. "they are here as a result of evil spirits or wrongdoing."
2. "they or their parents are being punished by God"
3. "they are a separate race; I think they come from Albania,"
4. "they should be avoided since they have a disease."

CHANGED ATTITUDE AFTER AN INTERVENTION STRATEGY

It was postulated that lack of interaction with albinic persons fosters negative attitudes toward them, and that a little direct contact might change their attitudes. With this assumption in mind, a class of tenth grades were sampled and presented with information about albinism during one occasion and in another, a person with albinism talked with the students. Following this, the same students who had made primarily negative statements regarding albinism were asked again to give their opinions about the condition or the speaker. Nearly every response was positive: "I found out that albinos most likely live a very hard life. I don't think I could handle it very well. I found out he was very nice."

"I found out that the speaker was a very nice person. I found out that albinos are no different than the rest of us and hope that he will come back to see us again."

"There really ain't nothing wrong with them." "I thought he was great. He can come to see me anytime. I like people who can understand his life and others too. Like he said, skin colour doesn't matter."

BEHAVIOUR TOWARDS ALBINISM

Attitude formation is a cognitive process mainly derived form an individual's reaction to experience, information, and self-perception. Once formed, attitudes tend to reveal themselves in a person's behaviour towards others. Albinic persons are the recipients of this connection between attitude and behaviour. The albinic individuals surveyed and interviewed reported life-long experiences with an insensitive and unaccepting public.

Behaviour toward albinism in different cultures varies signigicantly. According to the United Kingdom respondents, behaviour toward them seems positive. It is interesting to note that the sample of albinos from the United Kingdom were informed about the nature of albinism than those from the United States. A recently formed organisation, The Albino Fellowship, provides lectures, seminars, and the sharing of medical reports, vocational and personal experiences. There are scheduled meetings and a semi-annual newsletter.

In one African tribal community where blackness of skin is of great importance, albinism is not only less socially accepted.

but albinos had a high rate of death from skin cancer as a result of many outdoor activities in the torrid sun. (Albinos in the United States have ten times the chance of developing skin cancer than other whites do.) In the Cuba Indian tribe of Panama, albinos were considered weaker and asexual, yet they were respected as public performers (Oettle, 1963).

In the United States where school plays a major role in the development of children and youths, and 17 respondents to a survey gave a substantial amount of information concerning their treatment by classmates and teachers. While they felt protected at home from non-accepting behaviour, most stated that they were unhappy during their school lives because of name-calling, low expectations of academic achievement, and placement in schools for blind or severely handicapped persons. None of the respondents who were placed in special classes or schools for blind persons felt they were correctly placed. Academic achievement depended on the receptiveness of the teacher to having "different" students tended to do well in homework. Several respondents felt that they had to work much harder to prove their abilities, while others sought out classroom seats in the corner to avoid the teacher's attention. Standard teaching materials were sometimes difficult to handle.

RACIAL FACTORS

There are also certain racial factors involved in behavior toward those with albinism. Many persons cannot distinguish whether an albino is of black or white heritage, and parentage is often questioned. The most frequent question asked black respondents by others was "Which one of your parents is white?" The answer neither parent is of a different race encountered skepticism.

Persons with albinism were found to be keenly aware of how they are treated. A few reacted with anger, some were frustrated, and others simply made excuses for the general public. The effect of negative behaviours was varied. With some, it resulted in withdrawal and avoidance of the community, while others made an extra effort to be accepted. Adolescents had more difficulty coping with the psychosocial pressures than adults did. However, as they moved into adulthood they seemed to become more active, outgoing, and able to establish healthy relationships.

ATTITUDE TOWARD SELF

The final area explored was attitude toward self. As the albinic person reaches adulthood there appears to be an increase in ability to adjust and to accept oneself. Though based on some limited survey results, it seems safe to say that mental and emotional difficulties are no more prevalent in albinic adults than in the general population.

When asked how they felt about having albinism, many of the respondents in our study felt it was a matter of ill fate or bad luck. They believed it was not a personal but rather a social disadvantage because of society's way of differentiating them from the norm. Most albinos said "yes" when asked whether they ever wanted to be different. "Better vision" was wanted most often, with "normal skin color" requested by many of the younger girls. Younger males wished for better vision in order to obtain a driver's license.

As they were growing up many albinos did not know how to feel about themselves, partly because they did not know other albinos, and because of their lack of information about albinism. In a metropolitan area where at least 30 albinic persons were identified, most had not even seen another person like themselves. A black English teacher interviewed had received no information from others concerning albinism in the first 30 years of her life. These restrictive experiences, and the lack of correct information, quite naturally did not help her to extablish an adequate self-image

A personal account of the survey respondents is given below. Note his withdrawal from involvement in school, the destructive behaviour of peers, the need to be in a safe environment, and, despite a more acceptable adjustment in adult-hood, an only tentatively expressed satisfaction with his life:

My mother was an albino and she had a brother who was an albino. My mother had two children—one normal and one albino, and that was me. I did go to public school but did not learn much. I could not see the board and every teacher loved writing on the board. So I would just sit in the back of the room and hide.

The children laughed at me, some fought. The teacher didn't understand my condition so they left me alone. Yet when one teacher took an interest in me and I made high scores on his history tests.

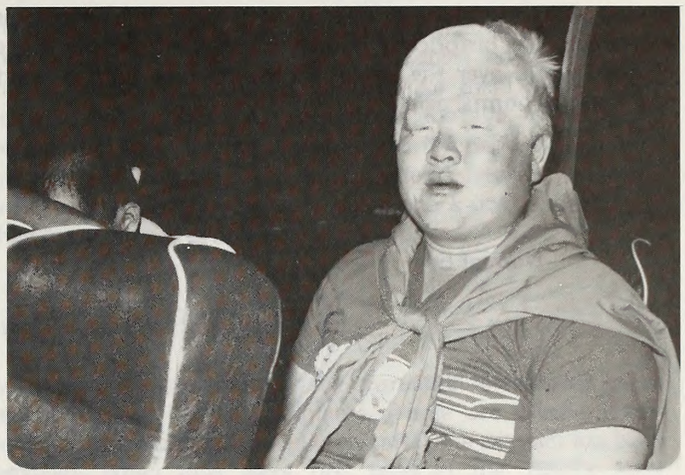
I find that the less educated people really make fun of my difference. Because of that, I sometimes wished that I was safe with normal skin, hair and eyes. I also feel safe in largely populated groups such as New York City: people there do not stare and act as cruel.

I had some trouble in my childhood but seem adjusted with myself now (at 30 years old). I manage a record shop in a busy downtown area. I hope to open additional stores and possible do some radio work however, I don't like my voice too much! I am pretty satisfied with my life right now. People still stare at me and know little about albinism. In fact, I know very little about it but am willing to help someone else by participating in this interview.

Of this project's many findings, one of the most surprising was the lack of knowledge albinos had concerning their own condition. Moreover, their restrictive lifestyles, a reaction to the stigma attached to them, resulted in a lack of awareness about other albinic persons and their shared disability. Despite problems dealing with the negative attitudes of the general public population and difficulties through the teenage years, most adults seem to be making an adequate adjustment to their community.

A number of things could be done in the future to prevent rejection, isolation, and outright mistreatment of these persons:

In bright light, an albino is not able to open his eyes easily.



Only at night or indoor, is he able to see.

1. EDUCATION OF PARENTS

Education of parents who have recently given birth to an albinic child would help prepare them for the proper upbringing of their child. They need to know the facts about albinism, and just as important, they must be helped with their own feelings about having a child with a disability. Early education and counseling can set the stage for an accepting and understanding home atmosphere in which the child can develop.

2. ACCURATE INFORMATION

Albinic children and adults should be given accurate information about themselves. They deserve to know the facts about their disability.

3. PUBLIC INFORMATION AND EDUCATION

Non-albinic persons need to have information about and opportunities to interact with those who have albinism. The school system is the best place to educate the public. As found in the reported intervention technique, it is possible to modify children's attitudes towards disabilities in general through contact with disabled persons and through information.

4. APPROPRIATE EDUCATIONAL FACILITIES

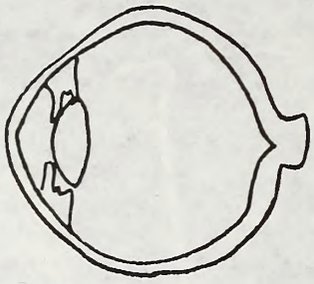
Albinic children need to be placed in appropriate instructional settings, and they need certain special consideration to facilitate their learning. Many of the children are sensitive to bright light and have trouble with glare on educational materials. Lighting conditions may need to be altered, certain colored chalks to be used on the chalk-board, and printed material should be clear.

A few cases of homosexuality were noted. However, research could not be conducted so as to attribute sexual preference to reaction towards the community's behaviour.

Charles J. V. Kolk
Bobra C. Bright
University of South Carolina

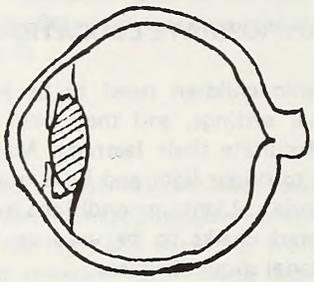
CATARACT—THE NO. 1 CAUSE OF BLINDNESS

The eye, like the camera, has a lens. In normal eyes, the lens is clear. When it becomes opaque or cloudy, it is known as a cataract. It is historically known that half the people in the civilised world over the age of 65 are afflicted with cataract as a result of normal aging.



Normal Eye

Lens is clear



Cataract

Lens is opaque

CAUSES

The most common cause of cataract is the aging of the person. Research suggests that this cause of cataract may be related to a clumping of protein in the lens. But cataracts can also develop because of infection, inflammation, injury, genetic and metabolic influences. Diabetic patients are prone to cataract too, expecially at an earlier age.

TREATMENT

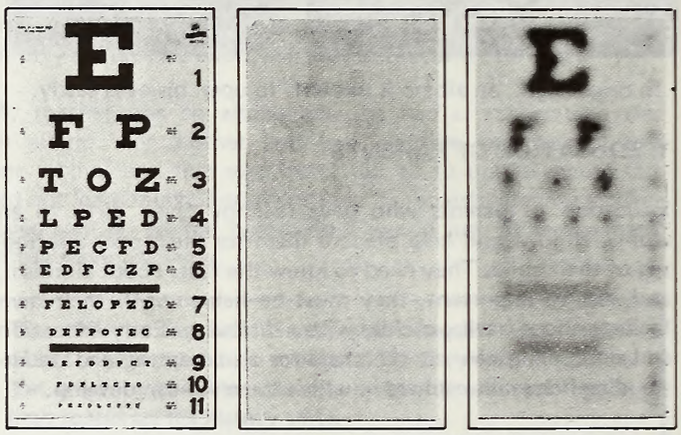
Unfortunately, cataract formation cannot be prevented by any known means, but sight can be restored with a safe surgical removal of the cataractous lens. Tragically, many people remain blind only because they do not know that treatment is possible or because they needlessly fear surgery. With the combination of surgery and proper corrective lenses, visual improvement is almost a certainty.

CATARACT SURGERY

Modern cataract surgery has a very high rate of success, improving vision in about 95% of the cataractous patients. For various modern surgical techniques, you may refer to the article on "Latest Developments in Cataract Treatment" which can be found in this magazine.

LENS REPLACEMENT

After surgery, the cloudiness in the eye is gone, but so is the lens. Without a lens, the eye is not able to see sharply yet. The next step is to get a lens replacement.



with normal eye

with Cataract in the eye

with Cataractous Lens removed

Better vision can be achieved in any of these ways of lens replacement: cataract glasses, contact lenses or lens implant.

SO DON'T WORRY

Do not be unduly worried if you or any of your dear ones are unavoidably afflicted by cataract. With the latest developments in surgical techniques and replacement lenses, this leading cause of blindness can be effectively kept at bay.

Social Welfare Officer
Low Vision Clinic

"LATEST DEVELOPMENTS IN CATARACT TREATMENT"

There has been tremendous advances made in the treatment of Cataract. The latest developments in Cataract Treatment within the last decade can be outlined as follows:

(i) The use of the operating microscope
(ii) The use of micro-sutures and micro-instruments
(iii) The correction of aphakia with extended-wear contact lenses
(iv) The correction of aphakia with intra-ocular implants
(v) The use of laser

The Operating Microscope:

Although Cataract surgery can be done without the use of an operating microscope, more and more eye surgeons are now recognsing the advantages of using one. The magnification obtained through a microscope makes surgery more accurate. It also makes possible the use of finer sutures which are less traumatic to the patient's eye. More sutures can then be used to ensure adequate closure of the surgical wound. Many of the post-operative complications in the past were due to inadequate wound closure.

Micro-sutures and Micro-instruments:

Surgeons are now using finer sutures, some of which are not visible with the naked eye. They are made of inert material, and do not irritate the patient's eye. They can be left for indefinite periods in the ocular tissues. To handle these micro-sutures better, instruments with microscopic tips are now available. A whole array of micro-instruments has been invented to do eye surgery through small incisions about 2mm long. Some of these fine cutting points are now made of diamond.

Extended-Wear Contact Lenses:

After the cataract has been removed, the eye is aphakic, and requires corrective glasses in order to see clearly. Aphakic glasses are thick (over 1,000 degrees) and therefore heavy and cause optical distortions. Some patients cannot adjust to them.

To overcome this problem, one can use either contact lenses or intra-ocular lens implants. Contact Lenses however require manual dexterity, to insert and remove them daily. Those contact lenses which can be left in the eye for extended periods of time are more convenient for patients, but they are not well tolerated by some. Patients wearing extended-wear contact lenses require regular check-ups, expecially if they have any eye problem symptoms.

Intra-Ocular Lens Implants:

An exciting development in the correction of aphakia is the use of intra-ocular lens implants. These are plastic lenses inserted into the eye, immediately after the cataract has been removed. When they were first used in the 1950's, they encountered several complications, and subsequently became unpopular. Recently, however, better implants have been invented and more surgeons are now using these lenses to correct aphakia. The advantages are that there are no optical distortions, as seen with aphakic glasses, and he needs not remove and insert these lenses as with contact lenses. The long-term complications of intra-ocular implants, however, are yet uncertain, and it is hoped that with the passage of time, these lenses will prove safe to be used.

The Laser:

The use of laser in Cataract Surgery is limited. Laser is used more frequently in retinal surgery. In Cataract patients, the laser is used to cut open thick lens capsules which sometimes remain post-operatively. Alternatively, a small needle-knife can be used. Further applications of the laser for eye surgery are being developed in some centres.

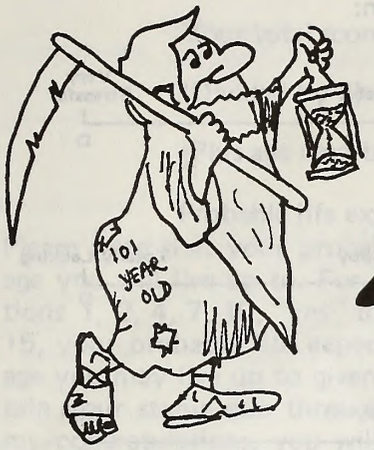
As you can see, rapid advances have been made in the field of cataract surgery. They have made cataract operation possible with a higher degree of success and satisfaction for the patient.

Dr C. Y. Khoo (FRCS, FRACS)
Ophthalmologist
Low Vision Clinic

The Art of Increasing The Depth of Life

"There is more to life than increasing its speed," said the Indian mystic Mahatma Gandhi. More important than speed is the depth of our lives. Speed can be noisy, shallow and empty. Deep living is calm, quiet and strong. It means thinking deeper, feeling deeper. It is penetrating the depth of self to discover the powers within. It is slowing down to experience the simple things that are worthy, vital and lasting.

What is more important, encompassing the world with increased speed or developing the deeper values of personal living? Increasing speed only conquers distance. Increasing the depth of life conquers ourselves.



LIVE UP TO ONE HUNDRED AND ONE YEARS

LIVE UP TO ONE HUNDRED AND ONE YEARS!

Interested? Well, if you have stopped flipping the pages and taken a peep at this page, you are surely curious about long life and whether you have the chance for that or not. This article consists of two parts. First, you must evaluate your present life-style and circumstances before you can hope to try out ways to live a long life. if you have a pen and paper ready, write down your answers to these questions as frankly (to yourself) as possible before looking at the next page.

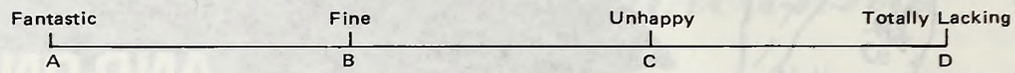
Questionnaire

1. Are you grossly overweight, say overweight by more than 10 kg? Yes/No
2. Have any near relatives either dead or living suffered from diabetes, digestive system cancer, breast cancer(females only), heart disease, stroke or any other significant condition? Yes/No
3. Do you have a physical or medical examination at least once a year? Yes/No
4. Have you suffered from high blood pressure,rheumatic fever, arthritis, chronic bronchitis, asthma or other chest disorder or serious illness or operation? Yes/No
5. Do you always give yourself enough time to sleep, rest or have some time of recreation like listening to music, going for a show etc? Yes/No
6. Do you exercise (i.e. jog, swim, play badminton etc) regulary, and normally for at least three hours a week? Yes/No
7. Are you in the habit of taking alcoholic drinks often, say more than 3 times a week? Yes/No
8. Do you always use the car seat belts and travel within speed limits? (It does not matter whether you are the driver or passenger). Yes/No
9. Can you consider yourself a calm and cheerful person? Yes/No

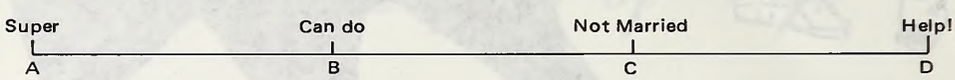
10. Do you smoke and usually more than a packet of cigarettes a day? Yes/No
On the scale of A to D (as given below), grade yourself in:

11. Your response to work pressure. Grade

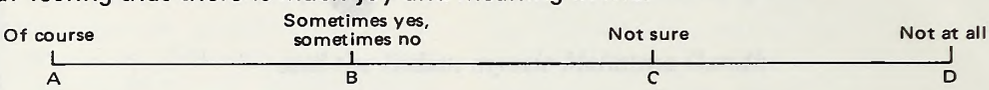
12. Your social life (e.g. functions, trips, gatherings etc). _____



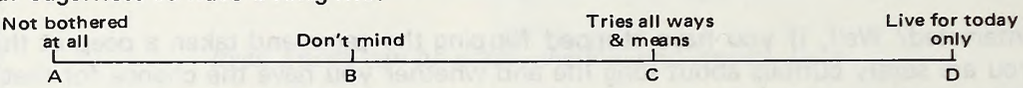
13. Your opinion of your marriage (if not married, put C). _____



14. Your feeling that there is much joy and meaning in life. _____



15. Your eagerness to have a long life. _____



Well, now that you have finished answering the questions, it's time to sum up your points and calculate your probable life expectancy.

Count your points with the following guide.

Question	Points	
	Yes	No
1.	10	20
2.	5	10
3.	20	10
4.	5	10
5.	20	10
6.	20	10
7.	10	20
8.	10	5
9.	20	10
10.	5	10

For questions 11 to 15
A – 30
B – 20
C – 10
D – 0

Computation:

Your total score :_____ pts

(Divided by 3) :_____ (to nearest whole number)

(Plus age next birthday) : +_____

Probable life expectancy: _____years

Please note that your probable life expectancy is NOT your guaranteed or most likely age you will live up to. For those fortunate ones who are able to answer "no" to questions 1, 2, 4, 7, 10, "yes" to the others and give grade "A" to each of questions 11 to 15, your probable life expectancy will definitely be more than 101 years. That is the age you may live up to given your circumstances RIGHT NOW. If you are able to maintain your status quo throughout your life, which no one has been able to do yet, then my congratulations, you will live up to 101 years! For the rest who realised that their life expectancy is below 101 years, please read on.

Live Up to 101 years

Check these steps. Make sure you can live them out 100% in your life:

1. *Love your job.* Your job is supposed to help you out in life, not you being a slave to it. Enjoy your job to the fullest no matter how hard times may be and you will find yourself ultimately body, mind, soul intact and you will live longer.

2. *Exercise.* Exercise can help you keep in shape, sleep better, reduce blood pressure, relieve stress and mental fatigue. You should exercise at least three times a week and for long enough to burn up 300 calories per exercise period. It may be walking for 100 minutes,, swim 60 minutes or run 22 minutes. Work out a suitable programme with your doctor, then follow it on a regular basis.

3. *Eat well.* Overweight persons tend to have lower life expectancy. Allow yourself to have regular meals with well-balanced diets. Do not skip breakfast. Eat a good breakfast to provide the nourishment and energy you will need in the early hours of the morning.

4. *Sleep.* Most people require 7 or 8 hours of sleep every night to be revitalised the next day and to maintain good health and proper equilibrium. However, do not sleep too much and be like Mr Porky. As mentioned, people who are overweight and do not work much will have shorter life expectancy.

5. *Get rid of your Bad Habits.* Harmful social habits like compulsive smoking, drinking or gambling etc should be avoided. It is estimated that 325,000 people die prematurely every year in the U.S.A. as a result of smoking.

6. *Ease Up.* Let go of any tension and have a sense of humour. If there is no one to joke with, try telling yourself a joke, laugh with each other and enjoy it.

7. *Meaning and Purpose of Living.* If you are clear on this, then you will surely live happily and joyfully. For many, knowing God is the meaning and having peaceful blessed relationship with God is the ultimate purpose in life. If you are seeking God still, seek the true and the living one, who can guarantee your meaning and purpose and give you an abundant life.

8. *Forget All About Living up to 101 Years.* This is a crucial factor. Why worry about your life-span? The more you worry, the shorter you will live up to. Why fear death? Drop all worries and fears. Live the best that you can in every aspect of your life some of the hints given above, and live up to a meaningful, purposeful life which ultimately may bring you beyond 101 years into an eternal life.

I convey my best regards to all of you, my dear readers, for a long life, hopefully beyond 101 years, to an eternal life!

Ben Lee

FOR YOUR EYES ONLY

If you are interested on the care for your eyes and also like to know which eye-wear can be of best service to you, then the following information and hints may help you.

PHOTOCHROMIC LENSES

These lenses can change colour when exposed to different degress of brightness. In bright light, they can darken almost immediately, within a minute, to give a brown or grey shade, though the reversal process will take a longer time. Hence, they are good for those who are very sensitive to glare. But being relatively darker, they are not safe for night driving.

MULTI-COAT LENSES

Available in glass and plastic form, multi-coat lenses are effective in sparing the wearer of irritating reflections normally present in ordinary lenses. Being highly passable to lights, they also make the wearer's eyes appear clearer and in the case of lady wearers, their eye make-up can be best appreciated!

TINTS

Grey colour is the best choice for tints because there is least colour distortion in this colour. Brown colour can give good protection against ultra-violet rays. In the case of protection against infrared heat rays, green glass lens will help.

SUN-GLASSES

Sun-glasses are undeniable a fashion accessory. Yet, apart from the factor of appearance, quality of lens is another important factor. Poor quality lens could cause unnecessary strains to the eyes and headaches. Before you decide to buy any sun-galsses, do try out the following test: Hold the lens at about 20cm in front of one of your eyes and look at an object with clear vertical and horizontal lines (eg. door or window frame) through the lens. Then move the glasses slowly from left to right, followed by up-down movements. Wavering of any of these lines indicate distortion in the glasses and these should not be used.

DIFFERENT EYE-WEAR FOR DIFFERENT WEARERS

Sportsmen, especially squash and badminton players should use plastic lenses in games. Plastic lenses are lighter and blurring of vision due to condensation on the lenses is less likely. Latest plastic lenses are made of polycarbonate, a substance that is not only relatively thinner than glass, but also more impact resistant. Drivers should use clear lenses in the evening and night. Any tint in the lens would reduce visibility and constitute a safety hazard.

FRAMES

Plastic frames are usually more robust than metal frames and more trouble-free as they have fewer screws. Plastic frames that are reinforced with a metal wire within are even better being stronger and more durable.

EYE-EXAMINATION

To maintain good vision everyone should have their eyes examined regularly by well-trained and skilled practitioners. In this way, not only can lens prescription be updated, illness like those that have caught the patient unaware, can be detected and appropriate action be taken.

It is also important for pre-schoolers to have their eyes checked every six months to a year. Should any defect of sight occur, it can be controlled at an early stage. The first routine visual check for students is normally carried out in the first year of primary education. Unfortunately for some children, it might be too late for them. An earlier test will be of advantage. For those over sixteen years old, a routine check once in two years is recommended.

Hope by now you are more informed on eye-wear and eye-care, meant, for your eyes only.

K. L. Tan (FBOA, FSMC)
Optometrist
Low Vision Clinic

DO YOU HAVE COLOUR-BLINDNESS?

About 1 in 20 men and 1 in 200 women are suffering from colour-blindness. Though colour blindness is usually harmless, to be well-informed about it may help to dispel undue fears or suspicions.

What is colour-blindness?

It is the inability to make out between different colours. A common form is the confusion of red and green. While in some it is the inability to differentiate blue-green shades, in others all colours are seen to be merely black and white of varying intensities.

Causes

The cause of colour-blindness is unknown. It is thought to be the lack of pigments (colouring matter) in the eye cells. It is usually congenital (present at birth) but may be acquired through poisoning by various substances, notable tobacco and alcohol. Disease of the Retina, optic nerve (nerve connecting retina to brain) may also result in colour- blindness.

Test

One test can be conducted by asking the person to pick out a particualr colour from a set of different colour wools. If he is colour blind, he confuses red with brown, greenish-brown and yellowish brown and he is unsure of green or bluish green, rose and grey.

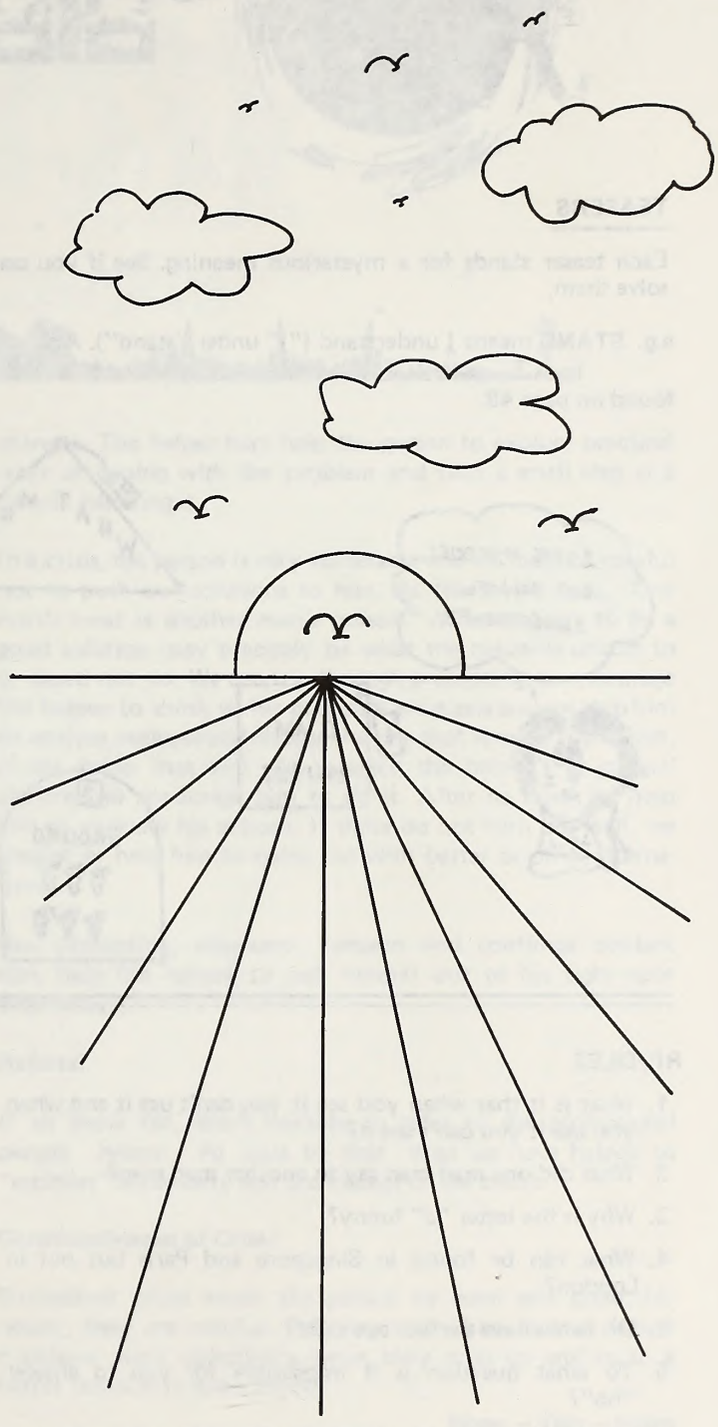
Another test is the Isihara test. The person's shown a chart which has a number formed by some dots of the same colour over a background interspersed with other colours. If one cannot make out the number, it means that he cannot tell between the colours of the number and the colours of the background.

Dangers

Red and green are universal stop/go and port/startboard colours on the roads and ships respectively. A red-green colour-blind person will not be able to tell the difference in these colours and a wrong interpretation may court disaster. However if the person is smart enough, he may tell the traffic signals by their positions. To him, colour-blindness does not bar driving. As precautive measures, colour tests are conducted for selection to be pilots, signalmen, or workers in textiles, paint and dye industry. Hence, colour-blindness pose no real danger to a person if he understands his limitations.

Treatment

Sorry, folks, there's no cure for colour-blindness. However the rarer form of colour-blindness caused by retinal or optic nerve problems may be checked from deteriorating.



Q. If my child is colour-blind, will it affect his school work?

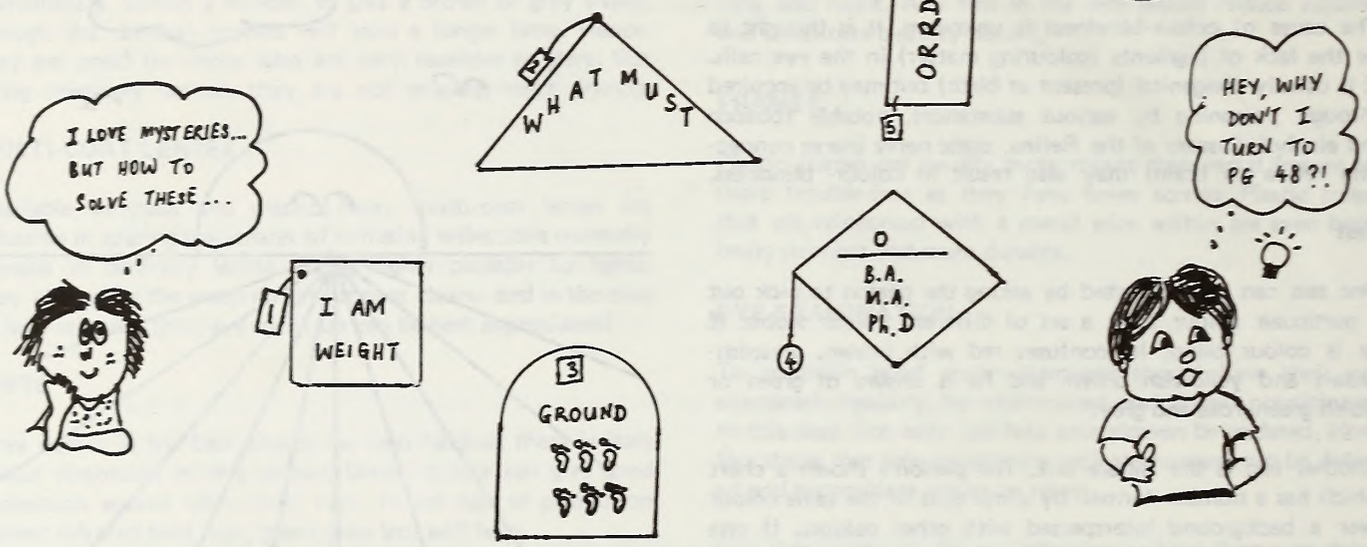
A. Colour blindness does not mean the inability to see colour but merely the inability to distinguish certain colours. It should not affect a child learning to read and write.

TEASERS AND RIDDLES

TEASERS

Each teaser stands for a mysterious meaning. See if you can solve them,

e.g. STAND means I understand ("I" under "stand"). Answers found on page 48.



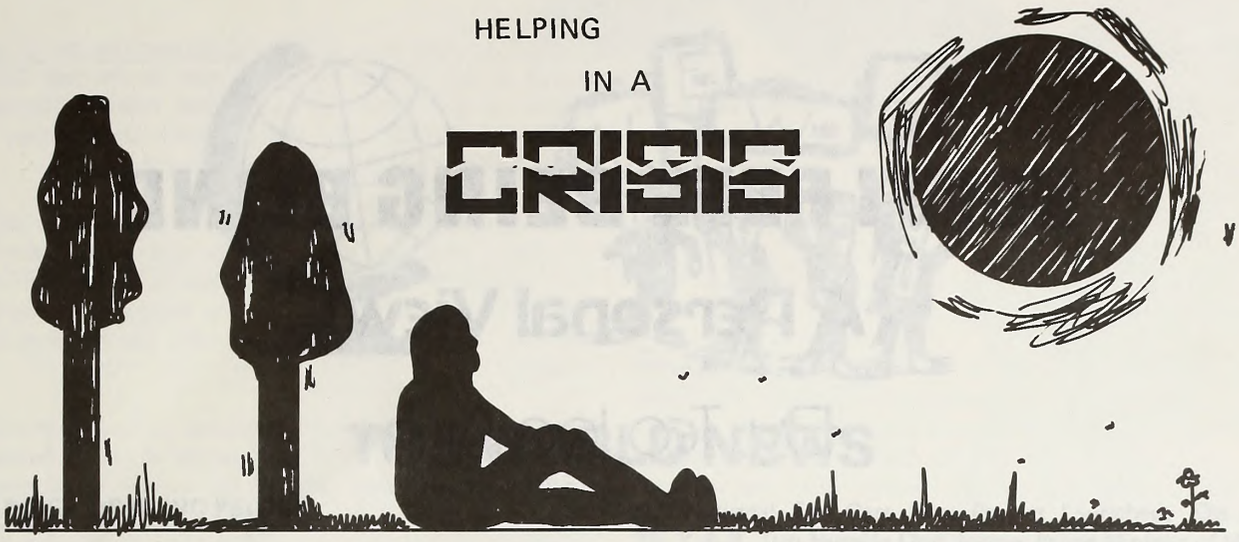
RIDDLES

1. What is it that when you see it you can't use it and when you use it you can't see it?
2. What did one mad man say to another mad man?
3. Why is the letter "J" funny?
4. What can be found in Singapore and Paris but not in London?
5. Do fishes have perfect eye sight?
6. To what question is it impossible for you to answer "no"?
7. What word will become shorter by adding a syllable to it?
8. Mr. Duck, Mrs. Duck and Baby Duck went for a swim, Baby Duck said, "Aren't we all four having a lot of fun? "Why did baby duck say four instead of three?
9. If a person was confined in a room that had in it only a bed and a calendar, what would he eat and drink?
10. What's the best way to solve riddles?

ANSWERS TO RIDDLES

1. Coffin
2. Don't talk like a mad man!
3. Without it you can't have a joke.
4. The letter "a".
5. Of course, none of them wears glasses!
6. "How to pronounce Y-E-S ?"
7. SHORT (Add the syllable "-er").
8. Baby Duck was too young to count.
9. Water from the springs and date from the calenda.
10. Look at the answers first.

HELPING IN A CRISIS



Helping In A Crisis

As each one of us goes through life, we are bound to come face to face with crises. The death of a loved one, birth of handicapped child, breakdown in relationships, failure in examinations, accidents or loss of sight—these are the very real things in life that can shake us and make us feel confused, threatened or depressed.

Simply stated, a crisis is any event or a series of happenings which triggers a person's life, threatens his well being and upsets his daily pattern of living.

We are a group of mobile people who move along from day to day, meeting people as well as problems of all nature. Sometimes, when a problem threatens, and in the absence of relatives, church ministers or professionals, the laymen are the people whom we go to for help. If you are the helper, what can you help?

Goal

A helper's goal is to help the person to avoid unpleasant feelings, behaviours, attitudes or thoughts and to focus on constructive characteristics.

Understand The Situation

A helper must admit that a problem exists and he makes attempts to understand the situation to its fullest.

Understand The Helpee's Emotions

A helpee may demonstrate emotions that convey anxiety, a sense of helplessness, frustration over his inability to make decisions, anger over lack of control on his life, a loss of self-esteem. He has to face up to all the above negative feelings of anxiety or resentment, and consider instead alternative ways of viewing and dealing with the situation.

Encourage Action

A helper may encourage the person to accept those situations which cannot be changed, and change those that are apt of changes. The helper may help the person to explore practical ways of coping with the problem and take a small step at a time in handling it.

In a crisis, the person is very vulnerable and we must be careful not to push our solutions to him. As the saying goes, "One man's meat is another man's poison." What appears to be a good solution may precisely be what the helper is unable to or dared not do. We can try, through prompting, to encourage the helpee to think of his probable solutions and we help him to analyse,evaluate and choose the one that is most apt to him. If we know that will not threaten the helpee's or others' welfare, we encourage him to do it. After he tried, we help him to evaluate his actions. If these do not turn out well, we suggest or help him to come out with better or other alternatives.

Our prompting, assurance, concern and continual contact may help the helpee to pull himself out of his tight spot eventually.

Referral

If all these fail, don't hesitate to refer to the professional people helper. At least by that time we have helped to "cushion" his anxiety and the impact of the crises.

Constructiveness of Crises

Sometimes crises teach the person to learn and grow. No doubt, they are painful. But they make him look at future problems more objectively when they crop up and be in a better position to solve them.

Hope – This – Helps

HOW I FEEL BEING BLIND

(A Personal View)

By: Teo Joo Ann

There are many ways of facing calamity. Some people confront it with courage; while others face it with fear, collapsing under it; but the majority of men and women accept it as a fact and cope with it to the best of their ability.

I have been asked many a time by numerous people as to how I feel being blind. I have therefore intended this article to be of a personal nature and the facts expressed will therefore be my own and not that of the general blind.

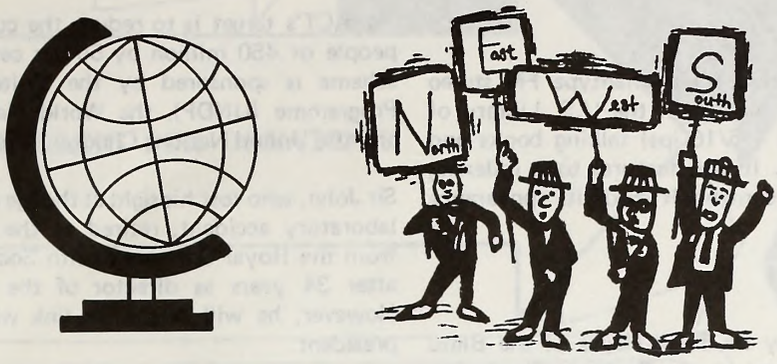
I was born blind, and unlike my other fellow-blind colleagues who became blind after birth, I was lucky that I did not have to undergo the trauma and frustration faced by the adventitiously blind. Not having seen the "many beautiful things in the world", there is really very little for me to fret about. To me, blindness has become my way of life. However, I do not deny that at times, especially when I am alone by myself, I sometimes wish that God would give me some vision so that I am able to carry out the functions where sight is needed such as getting on to the correct bus service. But being born blind, I realize that this can only be a "hope", for there is no possibility of me getting even residual vision unless science and technology come up with something new.

What about my attitude towards my parents, brothers, sisters, relatives and friends? Do I feel inferior towards them? Well, my feeling towards them are just like any other normal person. I may be blind, but the inferiority complex does not arise at all. In fact, they treat me without any discrimination. My handicap does not pose any problems to them. They know my capabilities and limitations and are willing to give me their wholehearted support all the way. Their acceptance of my handicap has greatly helped me in accepting my blindness.

In the field of education, my disability has encouraged me to strive even further into achieving a better and wholesome life. Being what I am, I realise that in order to fit myself into society and a working life, I will have to be better than my counterparts who are non-handicapped. In this respect, I owe my gratitude to the Singapore Association for the Blind where I obtained my basic education. Not only was I taught the three R's, but also I was taught how to accept my blindness and to be more independent. The impossible became possible; and together with it came my confidence as a blind person.

I would like to end this short article by saying something regarding the question of self-pity. "Do I pity myself because I am blind?" I have been asked. No! Never. I do not believe in self-pitying. Self-pitying would only result in more frustration. Instead, I have always believed that there is nothing wrong with blindness. To me, blindness should be made an ability and not a disability.

Therefore, to all my other handicapped friends, I say: Do not pity yourself; do not underrate your capabilities; and, above all, do not develop an inferiority complex because you are disabled. Do not think, "The world owes me a living", but determine that you will do something better than the non-disabled. As someone puts it rightly to me, "They conquer who believe they can".



THE WORLD NEWS

THE NUMBER OF BLIND PEOPLE

The World Health Organization estimates that 42 million people are blind, 80 percent of them needlessly. Without the application of far-reaching public health measures in developing nations, the number of blind people will double by the end of this century.

THE MAJOR CAUSES OF BLINDNESS

The four major causes of avoidable blindness around the globe are identified as cataract, trachoma, onchocerciasis ("river blindness") and xerophthalmia (nutritional blindness).

SURVEY ON NUTRITIONAL BLINDNESS

Xerophthalmia, or nutritional blindness as it is commonly known, remains the world's primary cause of blindness among young children. An estimated 5 million children in Asia and 10 million children worldwide develop symptoms of the disease yearly, and the cases resulting in blindness annually total up to 500,000.

Helen Keller International, a private voluntary U.S. agency founded in 1915, designed and directed a national blindness prevalence survey in Bangladesh. The survey revealed that Bangladesh's present vitamin capsule distribution program has helped about 46 percent of the vulnerable group.

The survey also revealed that children at the highest risk of xerophthalmia are between the ages of two and four. In general, boys are more severly affected than girls. Xerophthalmia is also found to be seasonal; it reaches a peak just prior to the monsoons.

This survey draws attention to nutritional blindness as a continuing public health problem in developing nation, where children are deficient in vitamin A because they are generally malnourished or because their parents' cultural preferences exclude vitamin A-rich food from their diets.

LATEST NEWS ON MALAYSIA

Some significant developments within Malaysia, the RCSB (Royal Commonwealth Soceity for the Blind) largest South-East Asian partner are:

1. National Eye Care Pilot Project Launched. On August 16, Y.A.B. Tun Hussein Onn, former Prime Minister of Malaysia and the President of the Malayan Association for the Blind, launched the National Eye Care Pilot Project for schools organised jointly by the Ministry of Education, the Malayan Association for the Blind and other bodies, with RCSB and the Asian Foundation for the Prevention of Blindness as two of the main sponsors.

2. Training Course Started. With technical assistance provided by the Christoffel Blindenmission and in co-operation with the Malayan Association for the Blind, the society is organising and funding the first-ever training facilities for the rural blind within the concept of developing Community-Based Rehabilitation (CBR) programmes for the thousands who have not yet been reached.

3. National Council formed. It all started when Sir John (Founder RCSB) convened a meeting which agreed on a formation of a national body for the blind more than twenty years ago. It was this year, on 6 October, that the National Council for the Blind (Malaysia) was launched by the Honorable Minister of Welfare Services under the presidency of Y.A.B. Tun Hussein Onn (Malayan Association for the Blind) with committee members coming from the Malayan Association for the Blind, the society of the Blind (West Malaysia). St Nicholas Institute, Sabah Society for the Blind and Sarawak Society for the Blind.

NEW AIDS FOR THE BLIND

Big and Little Erica

The Royal National Institute for the Blind in U.K. is now stocking two light, compact upward braille writing machines from East Germany. Both have the same six keys and space-bar arrangement as in a Perkins brailler, and a roller like a typewriter.

The Erica 500 Picht gives 31 characters to a line and 30 lines to a page. A detachable reading platform fits at the back of the machine. The Erica Mini-Picht gives 23 characters to a line and 18 lines to a page.

The great advantage of these machines, in addition to its low cost, is that they were much less noisy and much lighter than most braillers. The Mini-Picht is especially useful for notes taking.

BIT Talkman

The BIT Talkman, is a pocket-size, walkmantype FM stereo cassette recorder adapted to play both the U.S. Library of Congress 4-track, slow speed (15/16 ips) talking books and the standard stereo cassettes. It also features tone indexing recording and variable speed control. It made its appearance in the U.S. since last October.

The Sonic Pathfinder

This is a device developed by Dr Tony Heyes of the Blind Mobility Research Unit in Nottingham, England. The device is mounted on spectacle frames and can indicate the presence of objects on either side of the wearer, such as a wall or lamp-post, as well as in front. Signals from the right are received in the right ear, signals from the left in the left ear, and signals from the front in both ears.

If there is an obstacle directly in front of the user, side signals are automatically cut out. Like a guide dog, the sonic pathfinder assist the owner to walk through obstacles. Unlike the guide dog, the owner is aware of the presence of these obstacles. Being aware of landmarks would help if anyone wishes to vary his route.

Corning's CPF Filter Lens

Manufactured in New York, U.S.A., these filter lenses have the potential to help persons with visual impairment like cataract, Retinitis Pigmentosa, albinic blindness and Diabetic Retinopathy etc. They help by way of reducing some of the side effects of these ocular problems.

The main feature being its selective absorption of the ultraviolet light and some harmful blue portion of the light spectrum. Other features include its short light adaptation time, better contrast and visual quality. These lenses are available in plano form or with prescription and in single vision, bi-focals, trifocals or aphakic lenticular forms.

PUBLICATION

"Facts about World Blindness," a new information sheet of statistics and facts about the principal causes of blindness, is available free from the Public Information Department, Helen Keller International. Interested readers may write to the above at address 22 West 17 Street, New York, NY 10011, U.S.A.

CAMPAIGN TO HALVE THE WORLD'S DISABLED

Sir John Wilson, blind founder of an organisation which has helped to restore the sight of 1.3 million Commonwealth citizens over the past 13 years, is preparing for a new challenge as senior consultant to a campaign aimed at cutting the number of disabled people in the world by half.

For the next three years, 65-year-old Sir John will work fulltime for IMPACT, a worldwide crusade against preventable disablement, which he helped to set up.

IMPACT's target is to reduce the current number of disabled people of 450 million by 50 per cent by the year 2000. The scheme is sponsored by the United Nations Development Programme (UNDP), the World Health Organisation (WHO) and the United Nations Children's Fund (UNICEF).

Sir John, who lost his sight at the age of 12 in a school chemistry laboratory accident, retired at the end of last year (1983) from the Royal Commonwealth Society for the Blind (RCSB) after 34 years as director of the organisation since 1950. However, he will retain his link with the RCSB as its vice-president.

The campaign was officially launched in India during October 1983 with two weeks of mass camps at which thousands of disabled people were treated to restore sight, hearing or movement. Similar demonstration events are to be held in Africa, Latin America, the Middle East, South East Asia and Eastern Europe in the near future.

Many of the techniques used at the treatment camps were pioneered by the RCSB under Sir John Wilson's leadership. Sir John, who reckons to have travelled more than one-and-a-half million miles, covering 128 countries in the past 35 years, must be uniquely qualified to act as senior consultant to IMPACT. He believes the example of the RCSB – which began with just a staff of three in two tiny rooms in central London all those years ago – can provide many valuable lessons for any large-scale campaigns.

According to the latest available figures, in 18 commonwealth countries during 1982, RCSB medical teams restored sight to about 172,000 blinds, carried out 1,684,000 examinations, treated 1,316,000 for conditions which could have led to blindness and performed 23,000 operations, many of them for cataracts.

In India, Bangladesh and Pakistan, the Society sets up 1000 eye treatment camps based villages. Some 180,000 people have regained their sight, often as the result of a simple cataract operation which costs no more than £4.

Sir John Wilson points out proudly: "Our major achievement at the RCSB was to show that blindness is preventable, and often at relatively low cost. We pioneered techniques for rehabilitating and job training the blind, especially in remote rural and bush areas of Africa.

So now Sir John and Lady Wilson, his partner in the fight against disablement and his "eyes" on 50,000 miles of travels each year, move into a new arena. With confidence, Sir John adds: "IMPACT can prove that most of the world's disablement is preventable and that much of it is curable."

London Press Service Correspondent

Footnote. Our Acknowledgement to contributors of the above: Helen Keller International Inc., Royal Commonwealth Society for the Blind, Boston Information & Technology Corporation, "In Touch" Bulletin, Mandarin Optical and London Press Service

CALLING FOR DONATIONS

WE ARE IN DEEP RED ! !

The Singapore Association for the Blind is in **deficit** of more than **$100,000/-** this year. So please help out by making an outright **donation** which is **tax-deductible**.

The perforated form below is for you to complete to make your generous donation which will certainly help pull the Association for the Blind out of its **Red.**

Please detach here

To: The Assistant Director (PR & A)
Singapore Association for the Blind
47 Toa Payoh Rise
Singapore 1129

NAME:_____

ADDRESS:_____

MO/Cheque no:_____ Amount:_____

Your Donation Will Be Exempted
From Income Tax

. . . . . .
Signature

Tel: no:_____

WHEN YOU MEET A BLIND PERSON

BE MY FRIEND

Do not walk ahead of me.
I may not follow.
Do not walk behind me.
I may not lead.
Just walk beside me,
And be my friend.

THERE ARE MANY WAYS YOU CAN HELP BLIND PEOPLE LIVE NORMAL LIVES HERE ARE A FEW HINTS

IF YOU WALK WITH HIM	Let him take your arm. Do not push him! The motion of your body will tell him what to expect.
IF YOU EAT WITH HIM	Read the Menu and prices to him. If he wants help, cut his meat, and mix his coffee or tea. Tell him the position of the various foods on his plate by using the clock concept.
IF YOU LIVE OR WORK WITH HIM	Never leave a door ajar! Keep corridors clear of clutter. Tell him if furniture is moved.
IF HE IS ALONE	Always identify yourself when entering a room where a blind person is. Do not play any "Guess Who" games !
IF YOU SEAT HIM	When showing a blind person to a chair, put his hand on the back. He will be able to seat himself easily.
IF YOU TALK WITH HIM	A blind person can hear as well as you — sometimes better. Always talk directly to him — not through his companion.
IF YOU DIRECT HIM	Give directions as clearly as possible. Left or Right according to the way he is facing.

MORE RIDDLES

Q. What is the relationship of a child to its own father when it is not its father's son?

A. Daughter

Q. What ships will never go away?

A. Hardships

Q. What is worse than raining dogs and cats?

A. Hailing taxis

Q. What makes more noise than an ambulance?

A. Two ambulances

Q. What is the best way to keep fish from smelling?

A. Cut off their noses

Q. If blue stone fell into the Red Sea, what would happen?

A. It would get wet.

Q. What is worse than to find a worm in an apple you are eating?

A. Finding only half a worm.

MORE PUZZLES

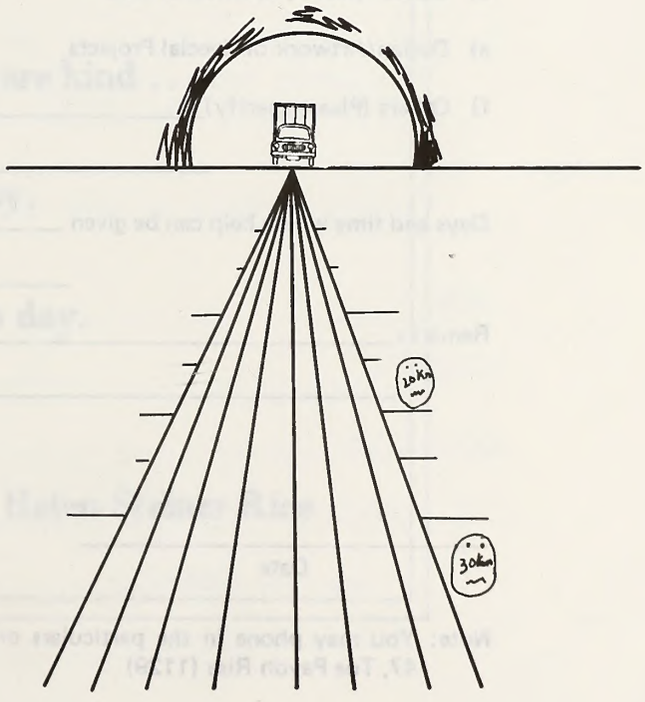
Here are more puzzles for you:

1. If one hundred cats will catch 100 mice in 100 minutes How long will it take for 7 cats to catch 7 mice?

2. If a brick weighs 10 kg and a half-brick, how heavy is a brick and a half?

3. Mrs. Chan bought 30m of cloth. She wanted to cut them into 2m a piece. If she cut one piece a day, how many days would she take?

4. The KTM Express leaves Singapore at 7 a.m. to reach Kuala Lumpur at 3 p.m. while The Daily Mail leaves Kuala Lumpur at 8.00 a.m. to reach Singapore at 5 p.m. The KTM Express travels faster than The Daily Mail by 20 km/h. When the two trains meet on the way, which train is nearer Singapore?



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Name in Chinese Characters:_____

Address:_____

_____

Telephone No: (Office)_____(Home)_____

NRIC No:_____ Occupation: _____

Age:_____Nationality:_____

Education Level Attained: _____

_____

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Particularly interested in helping with:
(Please mark with an X your particular interest)

a) Appeals (Fund-raising) ( )

b) Rehabilitation activities (organising social activities, social services, etc) ( )

c) Reading Service ( )

d) School (Music, Craftwork, etc.) ( )

e) Design/Artwork of Special Projects ( )

f) Others (Please specify)_____

_____( )

Days and time which help can be given _____

_____

Remarks_____

_____

_____ _____

Date Signature

Note: You may phone in the particulars or send this sheet to the Singapore Association for the Blind, 47, Toa Payoh Rise (1129)

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The more you give,
the more you get –
The more you laugh,
the less you fret –
The more you do
unselfishly,
The more you live
abundantly . . .
The more of everything
you share,
The more you'll always
have to spare –
The more you love,
the more you'll find
That life is good
and friends are kind . . .
For only what
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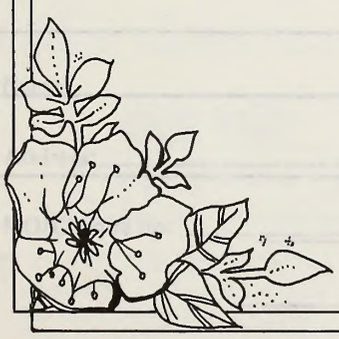
Enriches us
from day to day.



– Helen Steiner Rice

CALLING FOR ASSISTANCE

Dear Friend of the Blind

DONATION DRAW 1985

One of the key factors to the success of our past Donation Draw Projects has been your kind and dedicated assistance in helping us to sell and distribute the tickets. Without your help, we could not have achieved our target.

For our 1985 Donation Draw, we have printed 200,000 tickets and they are now ready for distribution and sales. The success of this project will contribute greatly in meeting our financial requirements of $1.3 million.

WE NEED YOUR HELP!

If you could cut out the form below and indicate the number of books (10 tickets per book) you can help us to sell and distribute, we would be truly grateful for your assistance. You can also phone in the particulars to us by contacting Mrs Florence Tan at 2514331 extensions 20 & 21.

While looking forward to hearing from you, we wish you a Happy & Prosperous New Year.

Yours sincerely

Koh Poh Kwang PBM BBM
Assistant Director
Public Relations & Appeals

P.S. If you are already assisting us now, please pass this slip on and get your friends excited about doing GREAT things for the Blind.

- - - — — — - - - — — — — — — - - -

To: The Assistant Director (PR & A)
Singapore Assocaition for the Blind
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Kindly arrange to have the Donation Draw Tickets delivered to:-

NAME: _____

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OCCUPATION: _____

TEL (important) (Office): _____

(Home): _____

No. of books required: _____

Dear Friend of the Blind

As we are not funded by the Community Chest of Singapore, the Singapore Association for the Blind is launching a project to sell Christmas and Chinese New Year cards to enable us to continue with our work for the Blind in Singapore. The profit from these sales will certainly help us to maintain and upgrade our services for the blind students in our School, the blind trainees in our Industrial Training Centre and our aged blind in homes or those supported by us with monthly food parcels.

We are appealing to you to help and also sell some Chinese New Year cards which are competitively priced at either 50 cts or 60 cts each. Samples of the 5 different cards are easily available on request. Please fill in the order form below and send your favourable response to us, thus assisting us in this needful and worthy cause. You can also phone Miss Betty Seow at Telephone no: 2514331 extensions 20 and 21 to make the orders.

Please contact Mrs Florence Tan at 2514331 extension 21 should you have any queries or need further information. We wish to take this opportunity to wish you and your family a very MERRY CHRISTMAS AND A PROSPEROUS NEW YEAR.

Yours gratefully
SINGAPORE ASSOCIATION FOR THE BLIND

Koh Poh Kwang PBM BBM
Assistant Director
Public Relations & Appeals

To: Public Relations & Appeals Dept
Singapore Association for the Blind
47 Toa Payoh Rise
Singapore 1129

Name: ______________________

Address: ______________________

MO/Cheque no: ______________________ for

______________________ Chinese New Year cards

ANSWERS TO TEASERS AND PUZZIES

Well, have you teased yourself sufficiently before you turn to this page?
If you have, here are the answers:

ANSWERS TO TEASERS

1. I am overweight.
2. What goes up must come down.
3. 6 feet under.
4. 3 degrees below zero.
5. Out of order.
6. Nothing afterall.

MORE PUZZLES

1. 100 minutes.
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ACKNOW LEDGEMENT

The Editorial Board would like to extend its appreciation to:

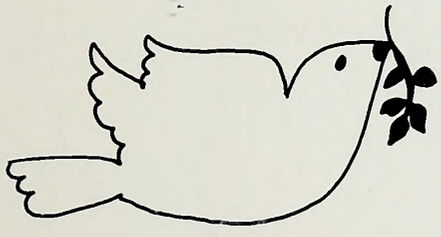
1) All Contributors of the articles
2) Rokhaiya Bte Shaik Hussain, Evelyn Chong, Patricia Chng
3) Helpers from Kay Poh Road Baptist Church
4) All our regular donors and supporters for their generous donation.
5) All those who have helped in one way or another to make this magazine a success.

Merry Christmas

&

Happy New Year

Hope you've enjoyed reading this magazine. Season's greetings and best wishes for happiness in the coming year.



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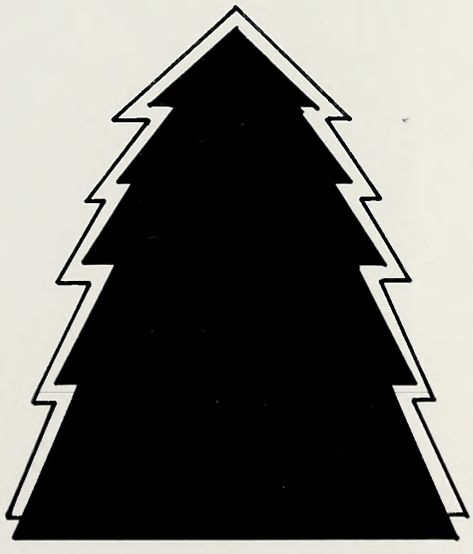

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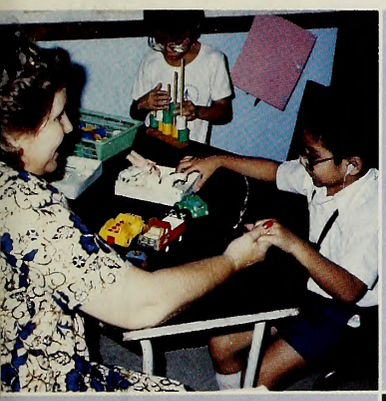

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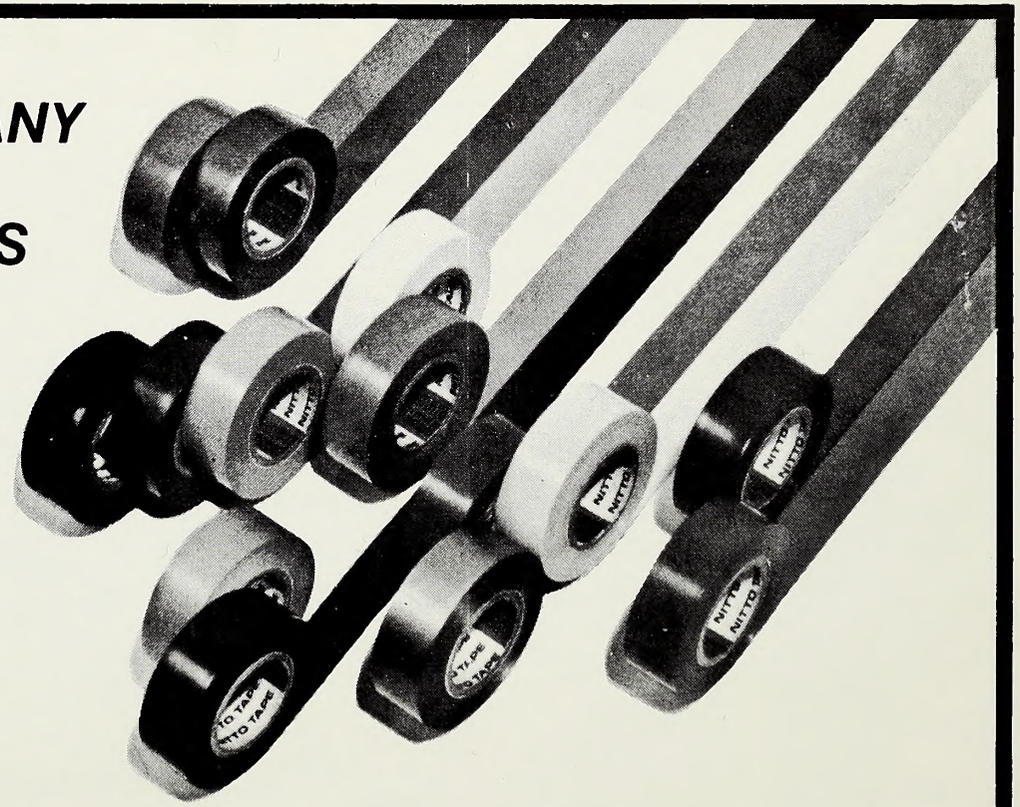

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Editorial

1985 has indeed been a difficult year not only for us but also for the nation as well. With the general economic downturn, many are feeling the strain on their resources. Support for the Association has been somewhat encouraging though there has been a considerable drop in financial support.

We are doing our level best to maintain our existing services. However, we are evaluating them with the view to providing more qualitative services.

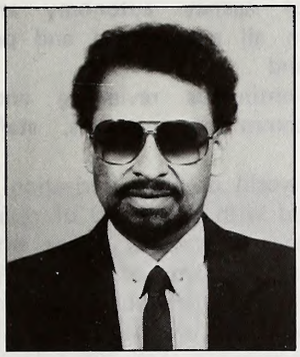
Future issues of our magazine will have a new outlook in that we shall feature articles that relate not only to the visually impaired but to other disabled groups as well. By doing this, we hope to promote a greater understanding among the various disabled groups. As the number of people with multiple handicaps is likely to increase over the years, we should now look at an integrated approach to solving problems that pertain not only to the disabled but also to the community.

The Singapore Association for the Blind has been accepted into the Community Chest of Singapore and will be funded as of fiscal year 1986. We hope that this will help foster closer links between the Association and other disabled groups of the Chest.

In an effort to promote greater public awareness of the disabled, a Disabled People's Week has been scheduled for early April 1986. Several organisations for and of disabled persons will be participating in an exhibition to demonstrate their skills, talents and abilities.

As we surge forward into the new year, we hope to see our resources being pooled together towards building an integrated community where the disabled and the non-disabled can work hand-in-hand without prejudice or discrimination.

Finally, let me take this opportunity to wish you a merry Christmas and a happy and prosperous 1986. Let us continue to work towards building a happier place for all.



President's Message

White Cane Magazine

This year marks the 34th milestone of the Association's journey along the road towards the amelioration of the situation of the visually handicapped people of our nation. Instead of pausing at the milestone to look back over our shoulders at the terrain we had traversed, I would like to direct our attention forward, along the road that we are to take, towards reaching our objectives, both immediate and distant.

The Singapore Association for the Blind has an excellent track record, both in its direct service provision as well as in its capacity to raise sufficient funds and more, to meet the costs of these services. This is not unusual, as most organisations for and of the visually handicapped around the world have been able to raise sufficient funds to meet their expenses. Blindness, from the fund-raising aspect, is a very marketable item. We have very many ardent supporters and excellent friends. Our sincere and heartfelt thanks to all of them.

While acknowledging that, raising money for the provision of all services for the visually handicapped people has had excellent results, nevertheless, this has become more and more difficult over the past few years. Therefore, it is with the greatest relief that we receive the good news that the Community Chest of Singapore had, after a 2-year period of waiting, accepted us as one of the partners in the collective fund-raising effort. It is with the greatest hope and confidence that I announce that, from 1986 onwards, the Singapore Association for the Blind will receive its monies through deficit funding from the Community Chest of Singapore. This event thus pegs a new milestone along this road to progress. Good luck and careful forward planning to all of us.

In the '65/66 Annual Report of the Singapore Association for the Blind, and in my capacity as the then Secretary-General of the Association, I pointed out that there must be collective fund-raising in Singapore and that we have to be watchful that the fund-raising aspect of work does not become more important than the services to the clients of our agencies. The Association for the Blind has always supported the idea of collective fund-raising. It was invited to chair the three-man pilot feasibility study on collective fund-raising carried out by the Singapore Council of Social Service.

The article mentioned above went on further to state that voluntary agencies were in a best position to initiate new ideas and programme and set up task forces and pilot projects to test the efficacies of these projects. Once these projects were successful and had become on-going ones, then these agencies could not do better than hand them over to the Government to incorporate them in the regular planning for all citizens.

In the present context, therefore, it is strongly suggested that the voluntary agencies utilising the funds solicited from the public at large, through various projects by the Community Chest of Singapore, could through joint effort, initiate programmes and projects that are much needed in Singapore for those among us who are considered to be disadvantaged. Once these joint projects have proven to be successful, then the relevant government departments should take on their share of the responsibility squarely and breathe life-giving breath into the nostrils of these projects and not let them die. Any good Government, worthy of such a name and worth

its salt, would without any hesitation, take on the responsibility for all citizens including those who are considered to be disadvantaged. In this case, as suggested above, they will only be advised to take on projects that have proven to be successful and not those that are considered to be white elephants. This process is indeed the essence of good co-operative government and nationhood — equal sharing of responsibilities by the Government, private and voluntary sectors.

This tripartite co-operation pre-supposes several things:

A **On the part of voluntary agencies:**

i well defined objectives and action plans drawn up in advance;
ii most cost-benefit and cost-effective procedures
iii streamlining of agencies at all levels as well as appointment of active and efficient task forces;
iv work within specified time-frames; and finally
v continuous reviewing and upgrading of committee members, staff and projects.

B **On the part of the Community Chest:**

i delineate clearly, terms of reference and extent of involvement and jurisdiction in relationship to voluntary agencies and the Singapore Council of Social Service;
ii emphasise partnership role and sharing of publicity, information, documentation and policies with all agencies;
iii assure continued support and enhancement of agency autonomy and independence in all professional and personnel matters; and
iv continuous reviewing and upgrading of committee members, staff and projects.

The world of computerisation and robotics has merged with the world of disabled and visually handicapped people. Those who are considered to be disadvantaged, should not don the role ascribed to them but should make every effort to dispel this ascribed role by initiating a change of attitudes in ourselves and in the significant others — in families and the community, among politicians and civil servants. We have a role to play. We have won for ourselves the right to speak for ourselves. While greatly appreciating the efforts and assistance given us by the less disadvantaged among us, we must be aware that it is only we, and we alone, who can represent ourselves best.

The new era will take us along the road of co-operation. We should seek the best. It is only with the best help that we can produce excellence. In computer language: 'garbage in, garbage out'. The community must afford the best in services if we are not to be doubly handicapped. We are equal citizens. We are 10% and more of the population. We want to play an equal role in our nation at all levels. We want the opportunity to show that we can.

Ron Chandran-Dudley
PRESIDENT

A Short Guide to the Services of the SAB

HISTORY

The Singapore Association for the Blind was founded on 6th November 1951 by a Scottish Colonel, GAP Surtherland, who was also its first president. Initially, the then Social Welfare Department gave active support and encouragement by providing a Welfare Officer and four acres of land at a token fee on which the present premises stands. From the beginning, the Royal Commonwealth Society for the Blind assisted in the formation of this Association.

Over the year, the services that were provided to its registered clients has shifted from those that were purely welfare in nature, i.e. the provision of financial and food subsidies, to habilitation and rehabilitation services. As the main emphasis of the Association is in improving the well-being of the Visually Impaired, it has endeavoured to do everything possible towards achieving this goal thereby preparing them to meet the challenges in the community.

LIBRARY

The Library which was officially opened in 1977, caters to the reading needs of both children and adults. Books in print, braille and on cassettes are available to its members. Our volunteers help with the reading of books into cassettes thus making more books available to the Visually Impaired.

EDUCATION

The School for the Blind was started in 1956 to provide pre-primary and primary education to those of school-going age. The syllabus is regulated by the Ministry of Education for all levels. The second language is Malay. A pilot project to teach Mandarin has been started.

In addition to the regular classes, the school also maintains two classes for those with multiple handicaps-the Hearing/Visually Impared and the Visually Impared slow learners.

The school also conducts Extra-Curricular Activities which include swimming, scouting and typing.

The residential staff of the school provides training in skills of daily living to the resident pupils. The training includes washing of clothes, ironing, sweeping and other house-hold chores.

Upon successful completion of the PSLE, these students will attend the regular schools for their secondary education. They study alongside their sighted peers.

To help them with their studies, books, charts, maps and diagrams in braille and tactile form are provided. Our volunteers help in the transcription by reading to our Visually Impaired Braillists, keypunching into the computer and making diagrams and charts.

REHABILIATION

The total needs of our clients are being looked into by the Community-Based Rehabiliatation Services Department. Vocational rehabilitation is given to those who cannot make the grade to secondary education or to those who are adventitiously blind. The Industrial Training Centre provides training in Cane and Woodwork. This is designed to help the trainees acquire certain useful work habits.

These trainess will be placed into open employment if they are found to be emotionally and psychologically ready. Orientation and Mobility Instructors help clients to move about in a new environment e.g. from their home to their place of work.

Telephony training is given to those with GCE "O" levels. On completion of the course, they will be placed into open employment.

The Social Welfare Officers are responsible for the general well-being of the clients. Priority is given to the more needy clients. Food and financial subsidies are given to clients who are receiving Public Assistance to help them supplement their tight budget.

LOW VISION CLINIC

The Clinic is run by volunteer Ophthalmologists, Optometrists, a part-time optometrist and a staff member. It provides free eye screeening services and dispenses aids to all clients of the Association. A one-third subsidy is given for all purchases of low vision aids.

Vision Testing and Eye-care Campaign 1984

INTRODUCTION

This campaign was jointly organised by the Singapore Professional Centre, the People's Association and the Singapore Association for the Blind. The month-long campaign, held in September 1984, was spread over 75 Community Centres.

OBJECTIVES

It had, as its main objective, the early prevention of blindness as most eye diseases in Singapore are known to be preventable if detected early. In Singapore, legal blindness is defined as:

1. Visual acquity less than 6/60.
2. Peripheral fields less than 20 degrees in diameter around fixation in the better eye after best correction.

The other objective was to correlate people's vision with their occupations so as to assess if they had vision that was up to the standards required.

Through this campaign, it was hoped that it would create an awareness among the public of the importance of eye care.

TESTS

About 12,057 persons responded to this campaign. They were tested for distant and near vision, colour blindness and eye muscle balance. Specialised tests for those suspected of having Cataract, Squints and Glaucoma were carried out in eight selected key Community Centres.

FINDINGS

Some of the more prominent findings from this campaign are as follows:

VISUAL ACQUITY

Of the 12,057 people who responded, 9,656 or 80.1% had good vision i.e. 6/6 to 6/9. 13.57% had fairly good vision i.e. 6/12 to 6/18. Over 6% had bad vision i.e. 6/24 to 6/60. 11 persons had less than 6/60 vision-legally blind.

LOW VISION

752 persons were found to have low vision-meaning less than 6/18 vision i.e. 6/24 to 6/60. This figure however, is not representative of the population as a sizeable number of people could have better vision if they had been provided with appropriate glasses. It is estimated that there would be between 10,000 to 30,000 people with low vision in Singapore.

BLINDNESS

11 out of 12,057 persons were blind. This indicates that there may be more blind people in Singapore than expected. The blind register kept by the Singapore Association for the Blind shows only 1,068 registered cases for 1984.

However, the survey showed that about 2,000 to 2,500 persons could be registered as blind. This refutes the false notion that the blindness rate was decreasing in Singapore. (See table attached).

A subsequent survey done in the Eye Department of the Singapore General Hospital confirmed this. Through this survey, a total of 908 patients were screened. Of these, 19 patients — 2.1% — had corrected vision in the better eye of less than 6/60, i.e. they were registerable blind.

Hence, it could be concluded that there could be many more blind persons than registered. In 1984 alone, there were 54,985 out-patient attendances at the Department of Ophthalmology at SGH. Of these, 21,070 were new cases. Excluding these new cases, it was estimated that about 100 to 150 were registerable blind. However, only 38 cases were registered in 1984.

VISUAL ACQUITY AND OCCUPATION

It was found that almost 10% of all drivers tested had substandard vision. Of the professional drivers tested, almost 12% had defective eyesight.

Of 3963 drivers tested in the survey, 377, or 9.5% were found to have vision below the required

level—6/12. Of the 287 professional drivers tested, 34, or 11.8% had eyesight below this level.

CAUSES OF BLINDNESS

Retinal Diseases are the most common cause of blindness—29.4%. The next common cause is Congenital—20.9%, followed by Glaucoma—15.9% and Optic Atrophy—12.8%.

RETINAL CAUSES

Diabetic Retinopathy is the most common cause—30.5% of cases. Other important Retinal causes are: Myopia—15.8%, Retinal Detachment—11.3%, Retinitis Pigmentosa—11.3% and Macular Degeneration—10.2%.

CONGENITAL CAUSES

Congenital Cataracts was the most common Congenital cause of blindness accounting for 15.8% of cases. Microphthalmia is the next most important cause—10.3%.

OPTIC ATROPHY

While brain tumors was the single most important cause—9.1% of cases, the actual underlying cause in the majority of cases—72.7% was not stated or unknown.

The survey at the Department of Ophthalmology also shows a similar trend. Retinal degeneration, chiefly diabetes, was the most common cause of blindness. Glaucoma is also an important cause. 47 patients had one eye in which visual acquity was less than 6/60.

CONCLUSIONS

From this campaign and from the survey at the Singapore General hospital, we can conclude that:

1. The actual number of blind people is much higher as evidenced from the survey at the Singapore General Hospital.
2. We note that retinal diseases, especially diabetes, has become the most important cause of blindness in Singapore over the past ten years.

RECOMMENDATIONS

1. Opthalmologists both in the private and public sectors should be encouraged to register their blind patients.
2. To facilitate ease and speed of registration, a simple form where only the basic patient information such as name, age, sex, address and relevant information on visual acquity need be included.
3. Since registration is voluntary, the advantages of being placed on the blind register should be publicised. These include tax relief for disabled dependants, subsidised low visual aids and free access to facilities in the blind school and re-educational and rehabilitation facilities.
4. General Practisioners and Optometrists should be allowed to register patients provisionally. The final assessment and registration can be made by an Ophthalmologist in the Low Vision Clinic of the Association for the Blind.
5. Blind registration figures should be reviewed annually to analyse trends and to solve fresh problems.

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SAB's Low Vision Clinic

I joined the Singapore Association for the Blind as a Sister-in-charge of the Low Vision Clinic in May 1985 after a gruelling interview. I'm glad to say that I survived that interview. I have been asked by many people as to why I chose this job instead of the glamour of a hospital. That, I must admit, had been my initial intention, but on further consideration I reckoned that with my more than ten years of experience in Opthalmic nursing I could contribute more by serving the blind and the visually handicapped than by doing endoscopy at the National University Hospital.

My first impression of the Clinic was one of pleasant surprise. I was amazed to see that it was so well-equipped with all the basic instruments necessary for a proper eye examination. For the time being at least, I do not have to worry about further equipping the Clinic. Nevertheless, I had plenty to do in getting the clinic organised, improving on the filing system of patients' records, checking of stocks and equipment and in getting the ophthalmologists to volunteer their services.

As in any clinic or project there is always am objective. The objective of the Low Vision Clinic is to endeavour to assist all those who are incapacitated by blindness or partial blindness, bearing in mind that not all patients who are labelled 'blind' are totally blind. The majority have some remaining 'residual vision'. It is the maximum utilization of this 'residual vision' with the appropriate low visual aid that enables a patient to function better as a person. It is hoped that the clinic's contribution to society will be the creation of a more independent individual who will no longer require public assistance but be able to make substantial contributions to society in the same manner as any of its other members.

Besides the administration and accounting, my job is to ensure the smooth running of the clinic. Prior to any appointment, an interview is conducted to find out about the patients' problems and needs. With this knowledge I can refer the patient to the appropriate specialist e.g. ophthalmologists or optometrist. Working closely with me are eight honorary consultant ophthalmologists who are usually on a week-end roster and a part-time optometrist who comes in three mornings a week.

The ophthalmologists role in the clinic is to determine the exact cause of the visual loss and to explain to the patient the expected progression of the disease. He will also ensure that all possible medical or surgical potentials have been made available to the patient. As there are no facilities for treatment in the clinic, any active pathology will be referred to the patient's respective opthalmologist at the Singapore General Hospital.

The optometrist's role is to ensure that the patient gets the best refraction (testing for glasses) possible and also to provide the appropriate low visual aid suitable to each patient depending on their individual needs and requirements.

After a particular aid is prescribed there remains the very important task of teaching and motivating the patient on the use of the chosen aid and to explain its usefulness and its limitations. This is the role I will assume as a Low Vision teacher. Sometimes patient's expectations appear unrealistic then it is important to begin the often difficult task of bringing the patient's outlook to a more realistic one. This will further contribute to the successful use of the visual aid. A follow-up

is usually done a week or two after the visual aid was first dispensed. This is generally done by phone and those patients who have problems in handling their aids are given further appointments.

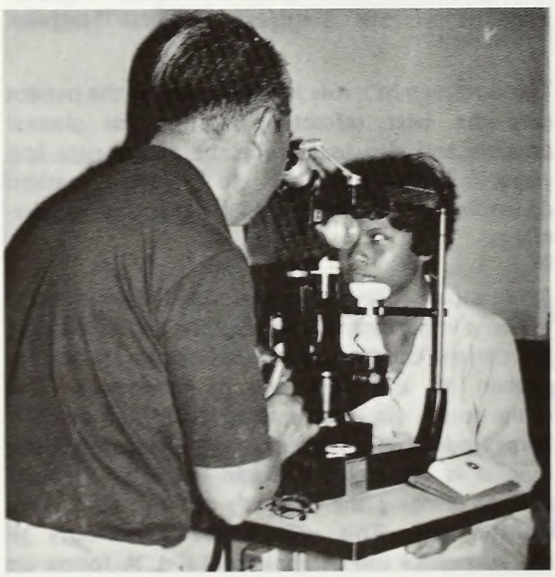
For more complete patient care and rehabilitation, the Low Vision Clinis has the support of the Social Welfare Officers and the Orientation and Mobility instructor to see to the other aspects of the patient's needs. – financial, mobility, employment and others. Together we work as a team towards a common goal – the total needs of the visually handicapped.

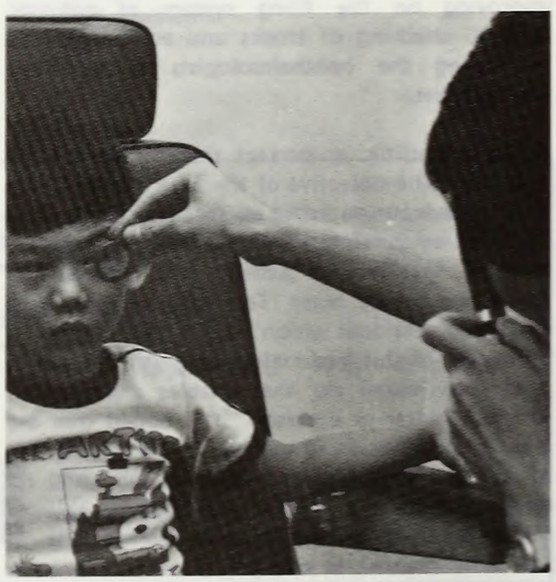
At present, the majority of the patients are the registered clients of the Association, the result of the screening done on all the children from the School for the Blind and also from the Open education programme. Screening was also done for all the trainees at the Industrial Training Centre. Others who had heard about the Clinic, rang for appointments themselves. The new referrals are usually from private ophthalmologists and from the various government hospitals who either refer patients specifically for low visual aids or simply to register.

The services of the Low Vision Clinic are available to anyone who has a visual disability which affects their daily activities at home, work or school. For registered clients of the Association, this service is free and the low visual aids prescribed are subsidized. For others, there is a charge of a nominal consultation fee and the aids are sold at cost with a small cover charge for administration services. For appointments or any enquiries, I can be contacted at the Low Vision Clinic Tel: 2514331-4 ext 28.

The past few months of work have been quite satisfying. However, there is still room for improving our services. But as of now, the Clinic is on its feet again and running. I hope that in the next few years, enough momentum would have been gathered and we can set out to achieve what we wanted to achieve initially – The Low Vision Centre of South-east Asia.

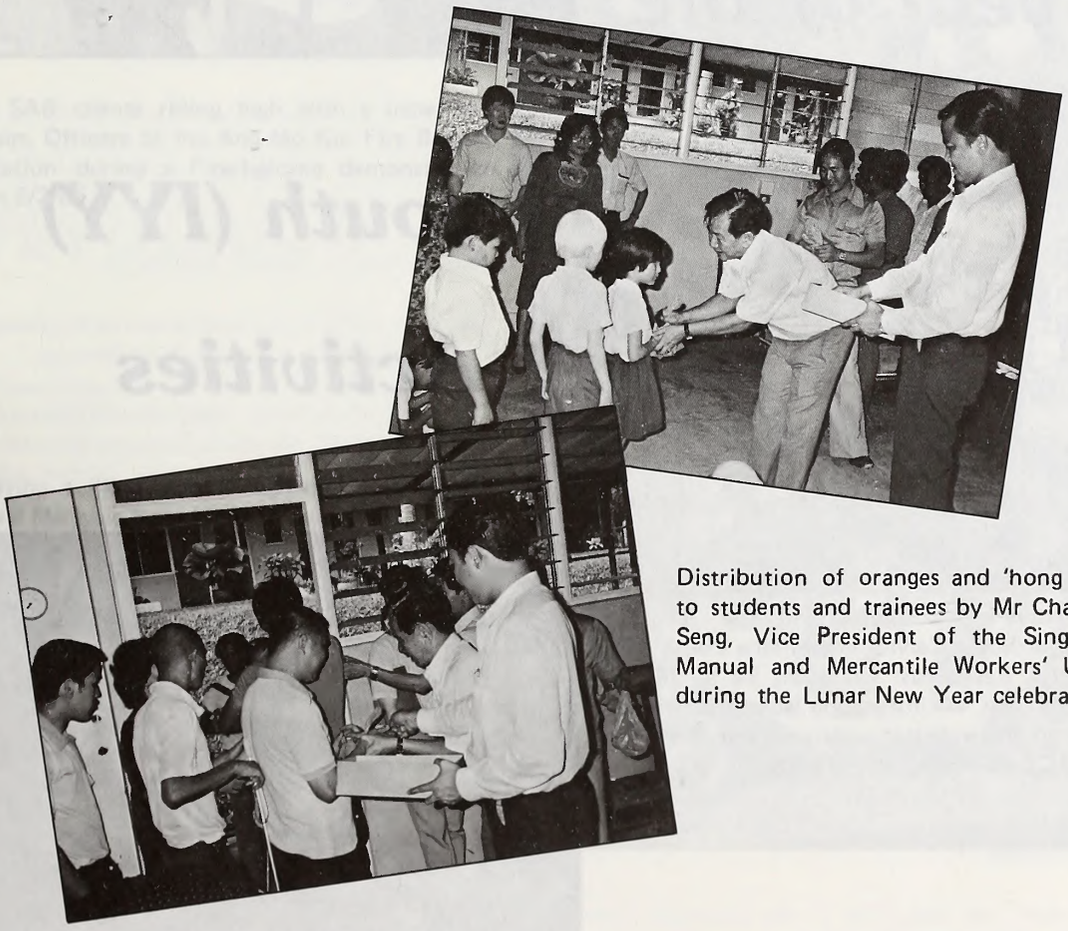
by Mrs Yap-Sng Kim Hock
SRN, OTNC OND
Sister, LVC





IYY Activities

Performance by students of the School for the Blind at the Singapore Polytechnic during the "Welshow 85" concert on 14th June 1985



Distribution of oranges and 'hong baos' to students and trainees by Mr Chan Sie Seng, Vice President of the Singapore Manual and Mercantile Workers' Union during the Lunar New Year celebrations.

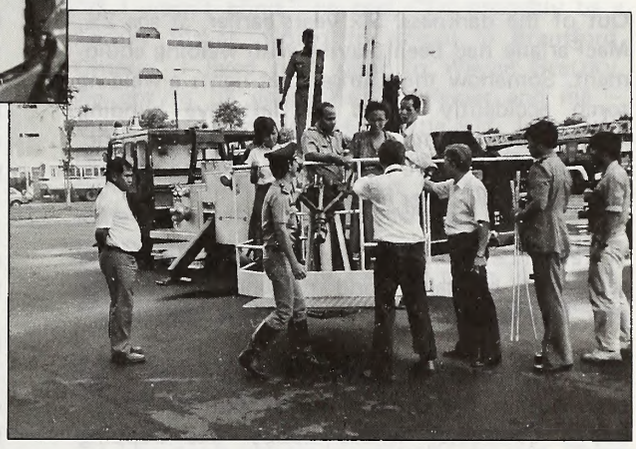
In conjunction with the UN-designated International Year of the Youth, an educational tour to West Malaysia (28/6/85 – 31/6/85) was organised by the Industrial Training Centre to give trainees and those in open employment a better idea of the lives and work of their blind counterparts there. Some of the places visited include the Gurney Training Centre, Setapal Special School for the Blind and the Malaysian Association for the Blind in Kuala Lumpur.

International year of the youth (IYY) Activities

The People's Association and the Singapore Council of Social Service organised a Youth Camp at the PA East Coast site from 24 to 28 June with the aim of integrating able and disabled youths to foster better understanding. 6 Trainees from ITC participated in this camp.

1985 Activities of the Industrial Training Centre

Trainees enjoying entertainment at the Riding for the Disabled Association's Annual party on 2 January 1985 at the Singapore Polo Club.



3 SAB clients riding high with a little help from Officers of the Ang Mo Kio Fire Brigade Station during a Fire-fighting demonstration on 9/2/85.

Having a 'fling' at the Highlands Hotel in Genting, West Malaysia from 12 to 15 June 1985.

This Man is Blind to Nothing

When he was 8 years old, Craig MacFarlane earned a gold medal for winning a wrestling tournament. That evening at his home in Sault Ste Marie, Ontario, he hung the ribboned medal on a bedpost in his room. And when he woke up every morning for several weeks, he reached over and caressed the medal.

"I knew then," he recalled, "that wrestling was my vehicle out."

Out of the darkness. Six years earlier, at age 2½, MacFarlane had been playing with welding equipment. Somehow the sparker that lights a welding torch accidently seared his left eye blinding it instantly. Within three weeks, 'sympathetic' ophthalmia, a severe inflammation of the eyeball, had blinded his other eye.

"I remember hurrying into the house after the accident," he said, "and running into a door that was partly open. I never saw the door."

Not long before his accident, MacFarlane had been out in the Ontario woods with his father, Ed, a contractor whose hobby was trapping animals.

"I don't remember my parents' faces or my older brother Ian's face," he said. "The only thing I have a memory of seeing as a little kid was a porcupine that day in the woods with my father — a big porcupine with all those quills sticking out. That porcupine is the only thing I remember seeing. People think that because I'm blind, I see black. But why would I see black? I don't know what black is."

Husky at 5 feet 7 inches (1.7 metres) and 155 pounds (70 kilograms), his voice bursting with energy and enthusiasm, MacFarlane does not even seem to know what being blind is. In a white golf shirt and blue jeans, he resembled young athletes everywhere. And he is probably the world's most accomplished blind athlete, certainly the most versatile: a wrestler, a runner, a discus thrower, a swimmer, a downhill skier, a water skier, a golfer.

"But now," he said, "I'm in the transition from being an athlete to being a businessman."

At age 23, MacFarlane, who has dual citizenship because his mother, Joyce, is an American, was recently named a consultant to the President's Council on Physical Fitness and Sports. He directs programme development for the Living Well Foundation of Houston. He plays 11 musical instruments, he composes songs, sings and plans to record an album. He is collaborating on his autobiography.

"I'd like to see a motion picture of my life," he said. "And I'd like to portray myself in it. It's all part of my drive to be an equal."

Before leaving Carlton University in Canada after two years, MacFarlane had a B average in pre-law and political science.

"If you store it in your memory bank, you don't need to study much," he said. "But halfway through college, I got bored and left."

He is not bored now. In addition to all his athletic and musical talents, he is an inspirational speaker who addressed the 1984 Republican National Convention, one of his 231 speeches in 39 states last year. His next ambition is to be a host on a weekly half-hour network radio show.

"I want to call it, 'Craig MacFarlane on the Road', " he said. "My target is the youth of America."

The youth of America might be embarrassed by what MacFarlane has done. As a wrestler, he had a 582-44 record over 11 years, mostly against sighted opponents. He would have been a candidate for the Canadian Olympic wrestling team in 1980, but that team was never selected. Canada had agreed with the US-inspired boycott of that year's Summer Olympics in Moscow.

As a youngster at wrestling matches, MacFarlane often would hear himself described by opponents as 'that blind kid.' Seldom by his name.

"I used to tell myself, 'I've got a name and you're going to know it before the day's over.'"

His opponents and observers in every sport have learned his name. Although wrestling is the only sport in which he has competed against sighted

opponents, MacFarlane has adjusted to other sports quicker than most sighted people. In early August he will be in Oslo for the world blind water-skiing championships less than a year after trying the sport for the first time at Cypress Gardens, Florida.

"Just skiing along, that was boring," he said. "I asked them if I could water-ski jump. They asked me when I wanted to do it, and I told them 'Right now'.

Taken out to the ski-jump ramp in a boat, MacFarlane walked around on it to get the feel of its dimensions, as well as the upward slope of the 21-foot ramp that projects a jumper as much as 50 feet in the air.

"I fell the first time, the rope popped out of my hands," he recalled. "But I didn't have any more trouble. I landed on 93 of my first 100 jumps."

Upon nearing the ramp, MacFarlane water-skied alongside a companion who alerted him to his approach with a numerical countdown.

"He'd yell '5...4...3...2...1' ", he said, "and off I'd go. Snowsking was a little different. The guide skier skied behind me, telling me which way to turn, but I asked him to ski ahead of me so I could hear where he went. By the end of my first day at Smuggler's Notch, Vermont, I was coming down from the top of the intermediate mountain."

When he began playing golf last year, MacFarlane applied the same philosophy.

"I always say, 'If I can 'see' it, I can do it — that's the title of my book," he said. "And in golf, especially putting, I see the green by walking on it." I feel the terrain, whether it's uphill or downhill. I feel how far it is to the cup. I try to feel a magnet in the bottom of the cup coming out of my brain. My third month, I broke 100."

One of MacFarlane's regrets is that his blindness prevented him from playing hockey.

"If I wasn't blind," he said, "I'd probably be a hockey player. Going to school in Brantford, Ontario, I lived next door to Wayne Gretzky, we got to be good friends, Weiner and me — that't his nickname. As a little kid, I thought Bobby Orr was the best hockey player, but my father used to tell me that Gordie Howe was better. Then one day, two years ago, I met Gordie Howe, and he invited me to live in Connecticut with him and his family. I stayed there 14 months. That's when I ran on the Olympic torch relay."

And for blind people, MacFarlane is a torch in the darkness now.

"If you don't believe in yourself," he said, "how can you expect other people to believe in you?"

By Dave Anderson
New York Times Service
in 'The International Herald Tribune' dated 4 July 1985

Snippets:
Blind Woman Beats Himalayan Mountain

Physical handicaps can be overcome with courage and determination—Julie Donnelly (left) has proved it. The 31-year old switchboard operator in a London City bank and blind since she was eight has climbed 18,000 feet up the western face of Mount Everest to the summit of Kalapathar with her friend, Elaine Brooks, 32, an experienced climber. They are pictured on Kalapathar with Mount Everest behind them.

The climbers took four weeks to complete the dangerous trek to the crest – an achievement which will raise money for Julie's favourite charity 'The Guide Dogs for the Blind Association'.

A True Understanding of Blindness in Small Children

By Josephine Nicholson M.A.

Many readers must sometimes wonder what blindness in infancy must mean, and how it is possible for the "poor little souls" to learn about the world in which they live but can hardly see.

In fact, of course, blind babies and toddlers are not aware of their shortcomings and they do learn about their surroundings, though perhaps not as quickly as children with sight.

Advances in medical knowledge are all the time improving the chances of early diagnosis and correction of sight problems, so permanent blindness can often be prevented, or its severity reduced, by prompt attention, even in children who are born blind.

Unfortunately, other advances also ensure the survival of many children with more than one disability nowadays, which would not have been possible years ago. Hence, we have increasing numbers of children who are blind and mentally retarded, or blind and deaf, etc. The development of such children depends a great deal on which of their disabilities is the more severe.

However, let us concentrate on what blindness means for an otherwise perfect child and his family. If there is absolutely no sight at all, then the child's surroundings have no appearance for him except that the atmosphere is either warm or cold; the surfaces around him are hard or soft; there are sounds which may or may not be interesting to him; and there are smells. The people in his life have no appearance either, except that they are gentle or rough with him, make various noises, have a particular smell about them, and give him many, more or less, pleasant sensations.

Later, when he feels like sitting up, rolling about, standing, his family has to see what he is trying to do and encourage him with words and steadying hands. If he does not actually touch an object with his hands or feet, he does not know it is there, so such objects have to be placed where he will touch them some time. If his days are not filled with music from a radio, he will be able to hear other sounds inside and outside the house which will eventually have to be investigated. He needs more conversation and company in his waking hours because he has nothing to look at or watch, such as washing on the line, waving trees, passing clouds, etc.

When he can walk and talk, he then has more questions to ask than a child with sight. "What are you doing? What makes that noise? Where are you? What are you making? What are you looking at? Where are we?" These questions come over and over again many times a day. If he is not asking questions, perhaps he is not being made sufficiently aware of what is going on; the family must make a point of telling him and involving him.

"I'm going to read the paper for a little while so you play with your cars or the shoes in the box." "I'm doing the ironing so you play over by the big chair out of my way for a while." and so on.

On a family drive, a blind child needs to be told that "There are many tall buildings on both sides of the road." "We are just going past Auntie Mary's house," etc.

Sooner or later, of course, he has to be "shown"

with his hands a dog or other animals; he will have to be lifted up to "see" by touch the mango on a tree; he will have to be taught how to post a letter; he has to be allowed to "see" with his hands the goods on display in the shop. He also, of course, needs to be taught that he cannot always be "shown" things and must be given a sensible explanation, such as "other people are going to eat those" or "it is too hot to touch," etc.

Because I did not become blind until I was six years old, I have some lovely pictures in my mind's eye from my early years. Such a delightful memory is of a big brown horse drawing some sort of farm implement through a field of golden corn. Both the horse and the driver wore large straw hats decorated with scarlet poppies and the horse's ears stuck through the top of his hat. If I had been blind on that day I would have missed that, unless my father had told me about it as we walked by. I also remember being taken home from a relation's house on a winter's night and was very puzzled by the fact that, although the moon was directly over Auntie's house when we came out, it was also directly over our house when we reached it; the moon must have followed us. A blind child does not know of such things unless told about them.

I hope that these thoughts help you to a better understanding of blindness in infancy so that, if ever called upon to deal with blindness in anyway, you may adopt a positive, imaginative approach from which all parties concerned will benefit richly.

Extracted from: VISION/Autumn The Official bulletin of The Royal Western Australia Institute for the Blind

EDITOR'S NOTE

We believe that interaction between the blind infant and his parents and/or other family members at an early age is most helpful to the child – especially in his later years of life.

Latest developments ...

MIRRORS HELP PEOPLE WITH TUNNEL VISION

A devise, using two mirrors, which reduces images to a convenient size has been invented at Exeter University to help people suffering from Tunnel Vision. The idea was developed jointly by Ewart Johns, an artist who has a limited field of vision as a result of Retinitis Pigmentosa, and Dr Ian Gordon, a senior lecturer in the Department of Psychology.

The device consists of two mirrors, a small one placed on the table or drawing board, where the user is working, and the larger one suspended above the viewer's head. Looking into the smaller mirror, a reduced image of the table or board surface is seen. In this way, someone who has good central vision, but only a limited field, can see much more of a large object such as a Chess board, a picture or a plan.

Ewart Johns has found it possible to draw or paint looking at his hand only in the mirror image, and Dr Gordon said that experiments had shown that most people can quickly adapt to writing or drawing in this way.

This device is not being commercially marketed, but details showing how an average handyman could construct it are available from Ewart Johns, Department of Psychology, Exeter University, Prince of Wales Road, Exeter. Please send a self-addressed envelope. Materials to make this device should cost about £110.

Extracted from
"In Touch" bulletin,
No. 38, January 1985

NEW AID FOR BLIND DIABETICS

A device to help blind diabetics test their own blood sugar level unaided has been developed by Hypoguard ltd. This device is known as the "Talking Hypocount" and it costs £110 excluding Value Added Tax. It is available from Hypoguard Ltd., Dock Lane, Melton, Woodbridge, Suffolk IP12 1PE, England.

Taken from
"In Touch" bulletin,
No. 38, January 1985

"TREMBLY" PELICAN CROSSING IN CARDIFF

A vibrating signal has been incorporated into a pelican crossing installed just outside the Institute for the Blind in Newport Road, Cardiff. The roadway there is extremely busy and the transport authorities would not allow audible signals which might be confusing in use on a dual carriageway. The tactile signal which vibrates when the green man lights up has met the approval of the local blind. Another advantage of this device is that it is very unobstrusive and, it is hoped, will be vandal-proof.

A new lease of life

There is hope for those with multiple disabilities as the Singapore Association for the Blind has taken the lead in developing a programme for this group of people.

Currently, there are two programmes being undertaken by the Association – The Low Visioned/ Hearing Impaired Project and the Blind and mentally Retarded Project. We shall concentrate on the Hearing Impaired Project.

HEARING IMPAIRED PROJECT

This project was started by a group of five volunteers who discovered a group of five hearing and visually impared students who were studying at the Pre-School for the Deaf in St Andrew's Cathedral. However, there were no on-going programmes for them there.

These students were in a predicament as both the Association for the Deaf and the Association for the Blind did not have the facilities to accommodate their needs. It was not until June 1984 that a pilot project was launched by the Association for the Blind to help these students.

The Executive Committee of the Association for the Blind felt it necessary to continue this project as there was tremendous potential in this group. They had made tremendous progress as was discovered from the month-long pilot project.

At present, there are six students, four volunteers and a teacher aide. We hope to recruit another teacher by the beginning of 1986.

Two consultants, Dr Jeanne Kenmore, Consultant with the Christoffel Blindenmission, and Mrs Veroz Vacha, Principal/Founder of The Helen Keller Institute for the Deaf and Deaf-Blind, Bombay, were engaged to assist in May 1985. They had given us many useful and valuable suggestions. These include:

1. The need to emphasize on daily living skills and mobility concept formation of the world of objects and how things work in this society.
2. The need for increased parental counselling.
3. The need to extend the school day allowing for additional subjects to be introduced or covered more adequately.

Programme

These children are taught individually incorporating the Total Child Approach and the Hands On Programme. The idea is to expose the child to everyday situations using various themes, and reinforcing them with relevant flash-cards. A classroom situation where formal work is done, is also introduced for twenty minutes each day.

Behaviour management techniques are applied emphasizing on rewards for positive efforts.

Parents participate in sign language sessions, and meetings are held once a month to monitor the progress of these children.

ASSESSMENT

A new assessment tool has been devised to monitor the children's progress in sign language and common skills. This is to be evaluated every six months.

RESULTS

Parents are very positive and much encouraged by the children's progress. The children are able to obey simple commands and communicate with their parents and with each other using simple sign language.

Though they may not be able to lead fully independant lives. At least there is a ray of hope for these children.

We are confident that the progress will enable them to be less dependent on their parents. Through closer parent child interaction, joy and meaning will be added to their lives. At least there is a ray of hope for these children.

Early detection of delayed development

INTRODUCTION

A handicapped child is extremely distressing to the parents. Far too often the diagnosis is delayed, and when the child is eventually found to have a disability, nearly everyone has some advice to give. Unfortunately the advice can be well-meaning but erroneous and ultimately harmful to the child. Unscrupulous agents and charlatans may offer a miracle cure to the child's handicap. They fleece the parents of money that could have been better spent on correct remedial procedures.

A Developmental Assessment Centre was therefore set up to provide the child suspected of developmental delay or any form of disability, with a proper and thorough medical diagnosis at the Singapore General Hospital in March 1985.

OBJECTIVES

The aims of this centre are to:

- Detect development delay and physical handicap, including visual impairment, in children at the earliest age possible.
- Make an accurate diagnosis of the child's condition. This will help the paediatrician determine what sort of outcome the condition usually has, and to be aware of known complications of the disease.
- Check for associated disabilities and medical problems, such as deafness, convulsions, and heart murmurs.
- Support and counsel parents concerning the management of their physically disabled or mentally retarded child. This can range from dietary advice to how to provide an optimal and stimulating environment for the child.
- Advice may be given on how to prevent the parents having another similarly handicapped child, especially if the condition can be diagnosed before child.
- Find placement in the most appropriate therapy or school for the child. For example this may include registering the visually Impaired child and placing him or her on the waiting list of the School for the Blind.

THE MEDICAL TEAM

The present medical team performing the assessments comprise:

- 3 Paediatricians with expertise in child growth and development, brain and muscle disorders.
- Ophthalmologist for assessing the child's vision.
- ENT (Ear, Nose, Throat) surgeon and an audiologist to assess hearing.
- Orthopaedic surgeon to assess problems of walking, stiffness (spasticity), curvature of the spine, and bony deformities of the arms and legs.
- Oral surgeon who will assess oral and dental problems.

THERAPISTS

On the treatment side, we have the following team, who will also carry out their own independent assessment of the child:

- Physiotherapist to help develop muscle power, tone, posture, and to prevent spastic limbs becoming permanently rigid.
- Speech therapist to teach the parents and child how to stimulate articulation and speech.
- Occupational therapist to train the child common daily tasks, such as feeding and putting on clothes.
- Early Intervention Programme. For the young child under 4 years old, the Movement for the Intellectually Disabled or MINDS (formerly the Singapore Association for Retarded Children) has an intensive

early stimulation and special education programme on a 1:2 teacher to student ratio.

REFERRALS

Referral to the Developmental Assessment Clinic is restricted because the complete examination may take up to one hour. It must be done through MINDS, or through a medical or surgical specialist who works predominantly with children.

However, any child under the age of 18 years old with a physical disability, including visual impairment, or developmental delay can be referred directly to another clinic: the Clinic for Handicapped Children, run by the University Department of Paediatrics. General practitioners, government clinic doctors, and even parents can refer their child directly to this clinic, where a paediatric specialist will determine whether or not a more intensive and multi-disciplinary assessment is necessary.

HOW CAN PARENTS DETECT DEVELOPMENTAL DELAY EARLY?

A THE "AT RISK" CHILD

Children at risk of developmental delay or potential handicap should be followed up more closely, and they include:

- The child whose mother contracted German measles during pregnancy.
- The slowly growing baby during the pregnancy.
- Any baby born extremely prematurely, or weighing less than 4 lb or 200 gm.
- Any child who had a difficult delivery, especially if oxygen had to be given for some hours after birth.
- The infant who had fits, or episodes of turning blue.
- The baby with severe jaundice (yellowness), or jaundice that lasted over 2 weeks.
- The child with obvious physical deformities.
- Other members of the family with blindness, mental retardation, deafness, or spacticity.

B EARLY SIGNS OF DEVELOPMENTAL DELAY

- The unduly quiet, passive, or "good" baby.
- Not appearing to focus or follow movement with the eyes by 2 months old.
- Not smiling in response to a familiar face by 3 months.
- Child feels floppy and unable to hold the head up by 6 months.
- Squints beyond 6 months of age.
- Not rolling over by 7 months.
- Not sitting alone at 10 months.
- Not crawling at 12 months.
- Not waving bye bye or clapping hands by 12 months.
- Any limping or dragging of the leg.
- Not walking alone at 18 months.
- Failure to say even 1 or 2 words at 21 months.
- Not putting 2 to 3 words together in sentences by 27 months.
- Abnormal pronunciation of words at 4 years.
- Loss of any previous abilities, unless the child has an acute illness at the time of assessment.

Any of the above signs should alert one to the possibility of a development problem, and the parents should seek advice from a doctor. The general practitioner can then refer the child either to a paediatrician for a more detailed assessment, or to the Developmental Assessment Centre. If the parents are still worried about their child's development, they should pursue the matter further and seek a second opinion. Delay in diagnosis can result in treatment being started too late to be of much value. As mentioned above, referral to another clinic run by the University Department of Paediatrics, the Clinic for Handicapped Children, is perhaps easier and less formal than to the Developmental Assessment Centre. The child is screened there first, and if necessary, referred over to other members the Developmental Assessment Centre team.

CONCLUSIONS

The Developmental Assessment Centre provides a multi-disciplinary team approach to diagnose any child with suspected developmental delay or physical handicap. Prompt recognition of development delay means early treatment that may sometimes prevent worsenning of the disabilities, minimise the handicap, and hopefully might even improve function. Associated defects of eyesight, hearing, walking difficulties, heart problems, delayed speech can also be picked up at this Centre, and appropriate therapy started. Advice concerning the general management of the child, including what food to give, and counselling for future pregnancies to prevent the same condition occurring again in the next child, may be given. This Centre therefore provides a most important service to the early detection, management, and prevention of a wide range of physical and mental handicaps, by a team of highly-trained professionals.

Britain leads the world in Braille printing for the blind

The first fully-automated Braille plant in the world was demonstrated recently at the Royal Institute for the Blind in London. By greatly increasing the speed of Braille printing, it enables blind people to receive printed news much more quickly than has been possible up to now. BBC World Service reported.

Braille was in itself a revolution which for the first time allowed blind people to read by running their fingers over embossed dots. And although there are today machines that print in the Braille alphabet, the process is slow. This means that blind people cannot receive printed information on topical subjects such as news, sports and arts fixtures. The new machine, built at Walton-on-Thames in England, was designed with this specific aim: to increase the speed of Braille printing without sacrificing the quality of the print.

It is the first fully automated printing plant of its kind in the world. It can print Braille simultaneously on 12 sheets of special paper, and with four pages to the sheet, it can produce 48 pages after each cycle of its operation. This compares with current Braille printing plants that are able to process only oen sheet per cycle. Multiply 48 pages by 1000 or even 1300, which is the number of cycles per hour, and you have a measure of the capacity and speed of the new machine.

Two significant technical advances have made this possible: Firstly, sheets are converted directly from reels of paper at the beginning of the process and then they are fed simultaneously into the press. Secondly, the sheets have to be embossed simultaneously – and this is done in trays spaced only two inches apart.

This second technical advance – the simultaneous embossment of the sheets – required some experiments on the part of the designers. They had to establish a satisfactory quality for the Braille print, and to determine the pressure necessary to achieve it. After embossing, the remainder of the machine is concerned with the collation of the printed sheets, wire stitching and folding them ready for delivery.

The designers have also provided for an option for short runs. This allows even faster operation which will enable the RNIB to widen the range of different specialist subjects available in Braille.

The machine demonstrated at the RNIB is a prototype; any orders from Britain or overseas, say the company, will be custom-built to individual requirements.

ACKNOW LEDGEMENT

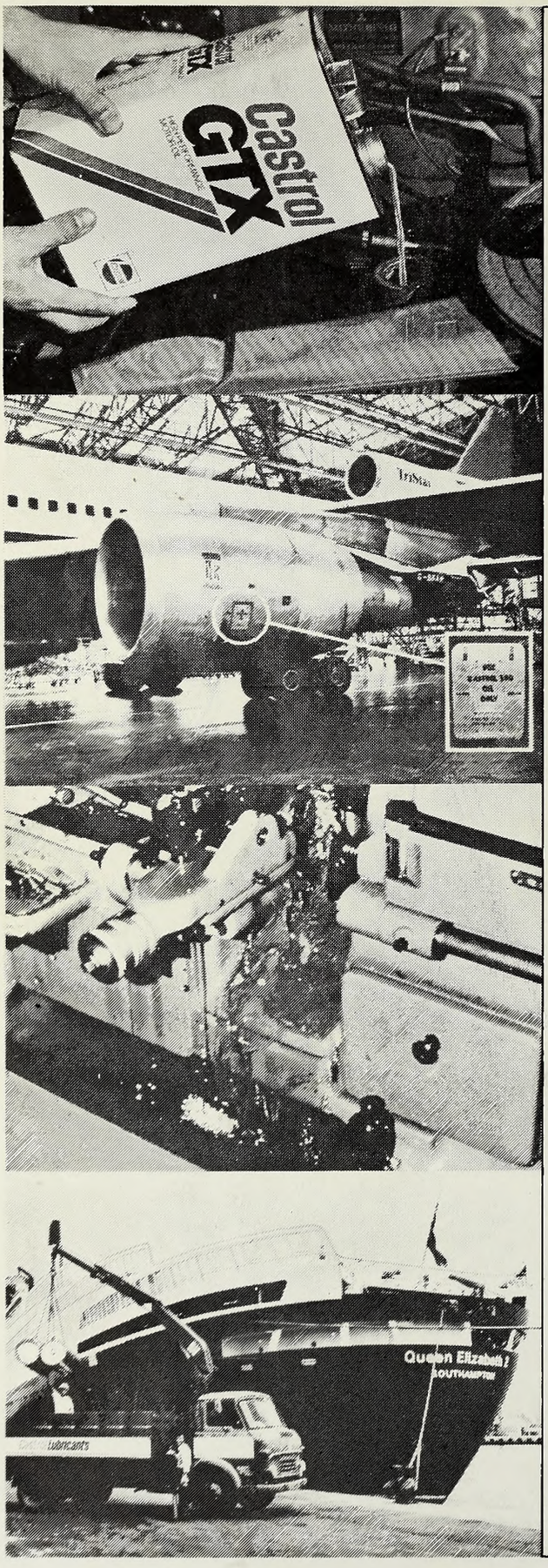
The Editorial Board would like to extend its appreciation to:

1) All Contributors of the articles

2) All our regular donors and supporters for their generous donations.

3) All advertisers for their kind support.

4) All those who have helped in one way or another to make this magazine a success.



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Supplies of Castrol Marine lubricants are delivered to thousands of vessels through a world-wide service network at 480 ports from Aarhus through Singapore to Zeebrugge.

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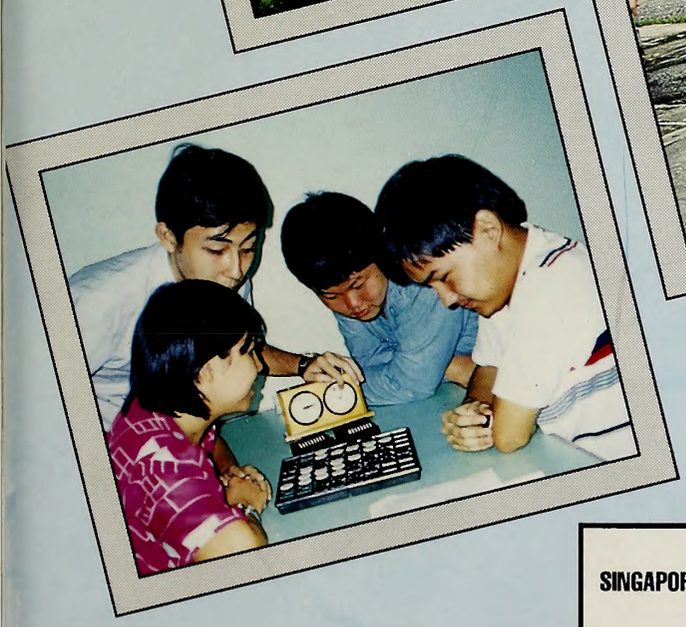

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SINGAPORE ASSOCIATION OF THE VISUALLY HANDICAPPED

PERSATUAN ORANG-ORANG CACAT PENGLIHATAN SINGAPURA

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Editorial

The Association was founded some 37 years ago on 6th November 1951. Since then, we have made much progress from our humble beginnings as a welfare organisation - handing out financial and food subsidies - to that of service provision. What is more significant is that we have become more forward looking in giving the visually handicapped a greater say in the running of the Association.

Since 1966, the visually handicapped have played a significant role in the running of the Association at all levels. For instance, 50% of the Executive Committee members are visually handicapped. Furthermore, the trend seems to be that there are now more people born with low vision and multiple disabilities than total blindness.

Taking all these into consideration, the Executive Committee mooted the idea of a change of name from that of the 'Singapore Association for the Blind' to that of the 'Singapore Association of the Visually Handicapped' in 1984 thus pointing the direction towards the year 2000.

The challenge for us as we move into the 1990s and beyond is to meet the new demands placed on us as our society progresses. One of the biggest problems looming ahead of us is that of finding gainful employment for the visually handicapped who are fast becoming more and more sophisticated and literate. With equal opportunities for education and the emphasis on excellence, Information Technology and automation, one wonders where the visually handicapped would be in such a society wherein expectations are high.

All the education that the visually handicapped have will come to naught if the more able-bodied members of our society fail to give them a chance to prove their worth. We hope to see a gradual change in the attitudes of society towards the visually handicapped in the years to come.

EDITORIAL BOARD

Albert Toh:	Editor
Mr Chong Jeo Ann:	Co-Editor
Ms Audrey Wong:	Sub-Editor
Mrs Patricia Chng:	Layout & Design
Mr Kelvin Lim:	Member
Ms Rose Samuel:	Member

THE PRESIDENT'S MESSAGE

Dear friends

Your Executive Committee members and I, together with the members of the staff and visually handicapped people, my wife Rena and my daughter Viva, warmly extend to you season's greetings.

It is during this end of the year period that establishments take stock of their year's activities - checking and balancing their books - spiritual, material, communal and personal.

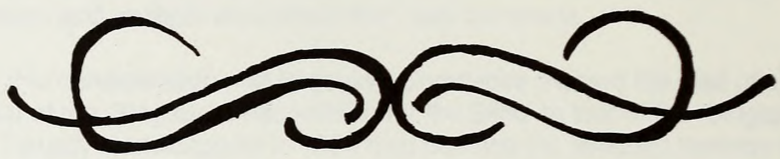
It is during this period also that we are reminded of our accountability not only to ourselves, our families and friends and God, but we are also accountable to our community and to those whom we have volunteered and elected to serve.

All of us, at some time or other, have indulged in introspection soul-searching, to a greater or lesser degree. We may try to analyse and scrutinise our motives and drives. We may also choose to evaluate our levels of performance and effectiveness - our role functions - whether we have either impeded or obstructed growth or contributed positively and constructively to the progress, productivity and success of the movement or establishment in which we are involved.

When we have gone through this end of year stock taking most vigorously and selflessly and found ourselves lacking, it is then that we determine to draw up a list of New Year resolutions, goals and objectives. On the other hand however, should we genuinely feel that our performance was positive and our colleagues and care-receivers feel likewise, then we are inclined to ask the question are we purely pragmatic and clinical in our service to others or is there an element of love threading through our mantle of service.

Many of us are mindful of the value of Faith, Hope and Charity or Love. The greatest of these being Love. Without love for those with whom we work or struggle, our achievements and perceived successes, we are told, amount to and account for naught. Therefore, dear friends in fellowship and service with the disadvantaged in our community, it is with love that we thank you and wish you and your loved ones all that is best in peace, health, happiness, contentment, and may God's blessings be with you throughout this season and the New Year.

Mr Ron Chandran-Dudley
President, SAVH



THE PLIGHT OF A LOW VISION PERSON IN SOCIETY

Low Vision can be defined in many ways, depending on how one looks at it. From the clinical aspect it is defined as a visual acuity of between 6/60 to 6/24. To the man-in-the-street, low vision can be explained as having some amount of remaining usuable vision as compared to the blind who does not have any. The low vision person would like to define it as being able to see but not enough to live up to society's expectations.

The low vision person is in a dilemma in trying to create an identity for himself, because he has always been conveniently lumped together with the blind and is expected to function like the blind. Those involved in serving the blind and the visually handicapped now recognise that the needs of the blind and the low vision person are different. Even in rehabilitation, the emphasis for the low vision person is on maximising the use of remaining vision whereas for the blind it is on the teaching of techniques using their other senses.

Initially, having low vision is like being in a crisis, comparable to other crisis such as separation or death. There is a complex interplay of emotions between the visual loss, the disruption in his lifestyle and his ability to cope with the situation. After a period of 'bereavement', the low vision person has to grapple with the problems of adjustments within the family as well as society.

Adjustments can prove a great obstacle here as he realises that visually he is now hovering between two worlds, that of the sighted and that of the blind. In fact, the world he is in now is relatively unknown and he may feel a sense of isolation, that he is alone in his plight.

Many low vision persons have been through a great deal of misery before their problems are recognised by the public as that of being low vision.

For example a low vision child in school may be labelled as 'stupid, unattentive, clumsy or careless' long before the teacher or parents realise the real problem. It may be obvious to the teacher that the child cannot see and therefore glasses would be the solution, but low vision is more than just needing a pair of glasses. It implies that this person needs specialised aids to function but even then these aids only partly help to solve the problem.

Low vision is an invisible handicap and unless a low vision person admits and seeks appropriate help, no help will be forthcoming as nobody will know about the handicap (unlike the blind who can be recognised by the white cane or a guidedog). He may pretend to see objects that he can no longer see, rather than admits his limitations. The reluctance to be labelled blind is one major reason why he denies having low vision. With this denial a low vision person is shutting himself off from all services available to him.

While blindness has been accepted as a 'classic' handicap with an established position in society, low vision is one of the 'modern' handicaps that needs lots of public education in order to gain recognition and understanding. It is easy to understand what blindness is all about. But how does a low vision person explain to those around him that at times he can see and behave like a sighted person but at other times he can hardly see at all? It is this ambiguity that makes a low vision person feel insecure and leaves the general public confused.

In short, the problems faced by the low vision person boils down to the fact that the concept of low vision in society is still relatively new and that the handicap is difficult to recognise, unlike blindness. As a result, society and the low vision person find it difficult to handle the problem adequately.

However, the low vision person has an important role to play in changing this trend. He has to show that he is not ashamed of having low vision and he should always explain the problems he faces to acquaintances and associates. In this way they will be educated on the handicap and gradually a greater understanding will be fostered.

Society can do its part too by respecting the status of a low vision person and treat him as he has always liked to be treated A SIGHTED person with a VISUAL HANDICAP.

MRS YAP-SNG KIM HIOK
(SRN, OTNC, OND)
SISTER-IN-CHARGE
LOW VISION CLINIC

IT FILLED THE WHOLE ROOM

A wealthy businessman in Hong Kong had spent the best years of his life building up his mammoth textile business. One day, he was told that he was dying from an incurable disease. His immediate thought was of his business. Who would carry it on? And which of his three sons could he entrust it to?

He called his three sons to him, and gave each of them a 10-cent coin. To each he said: "go into the market place, and buy something that will fill this empty room. You must not spend anything more than 10 cents, and you must be back before sunset."

When evening came, the first boy dragged a bale of hay into the room. When he undid it, it hid two walls of the room. The old man gave a grunt of satisfaction. The second boy brought in two bags of cotton, and when he undid them, the cotton covered three walls.

"Excellent!" exclaimed the old man. Then he turned to the third boy. "What have you bought?"

"Father," he replied uncertainly, "part of it went to feed a hungry child, and part I gave to the church. After I had done that, I found that I had only one cent left. With that, I bought this candle."

Saying that, he lighted the tiny candle - and the light from it filled the whole room!

MADAM, I'M ADAM

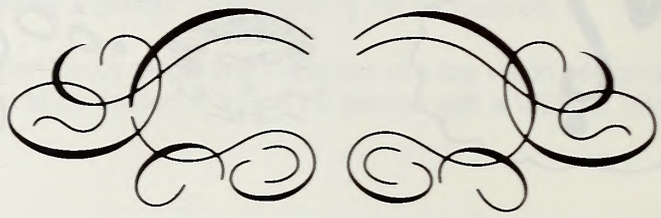
The three-year old son of one of my missionary friends had just been told the story of creation.

"What was the name of the first man?" asked the boy's father.

"Adam."

"What was the first woman's name?"

The little fellow chewed that over for a while, then said triumphantly, "Madam"!!!



THE $10,000 QUESTION

A wealthy man placed an advertisement in the papers: "$10,000 to anyone who can prove to me that he or she is truly satisfied with life."

On the appointed day, hundreds of men and women from all walks of life streamed into his office, each hoping that the $10,000 would be his or hers.

One man said he found complete satisfaction in his job, and that he was perfectly contented with the salary he was getting. "I have a fine family," explained another.

"There's nothing for me to grumble about," said a third, "because I have a string of degrees from the world's top universities after my name." And so it went on.

And do you know something? Not one of them won the $10,000. Why? Because not one of them could answer a simple question that the advertiser asked each of them. The question was: "If you are truly satisfied with life, why do you want my $10,000?"

A JOURNEY TO THE CAMERON HIGHLANDS

An educational trip to Cameron Highlands, sponsored by Nicholas Kiwi International Pte Ltd, was organised for our pupils from the 15th to the 17th of June 1988.

Good weather was ahead of us. The long awaited trip to Cameron Highlands had finally arrived. With a little persuasion and encouragement from the parents and teachers, we were able to assure some of the younger children that they would have an enjoyable time with us. From the mood of uncertainty to excitement, we left Singapore with high expectations.

The journey to Cameron Highlands covered six states and the distance was 560 km. Stops were made for hungry people, nature calls and for those unfortunates who suffered from travel sickness. Ghost stories were told by young and old to keep those tired eyes open. However, many chose to snooze on the way - right into the early hours of the day.

Some minor problems were encountered on the way. But with the close camaraderie of the bus drivers, the problems with the headlights were soon solved. Our guide, Mr Lim kept the lively mood going by educating us on the history of Malaysia and the different aborigines of the country like the Senoi, Negritos and Proto Malays.

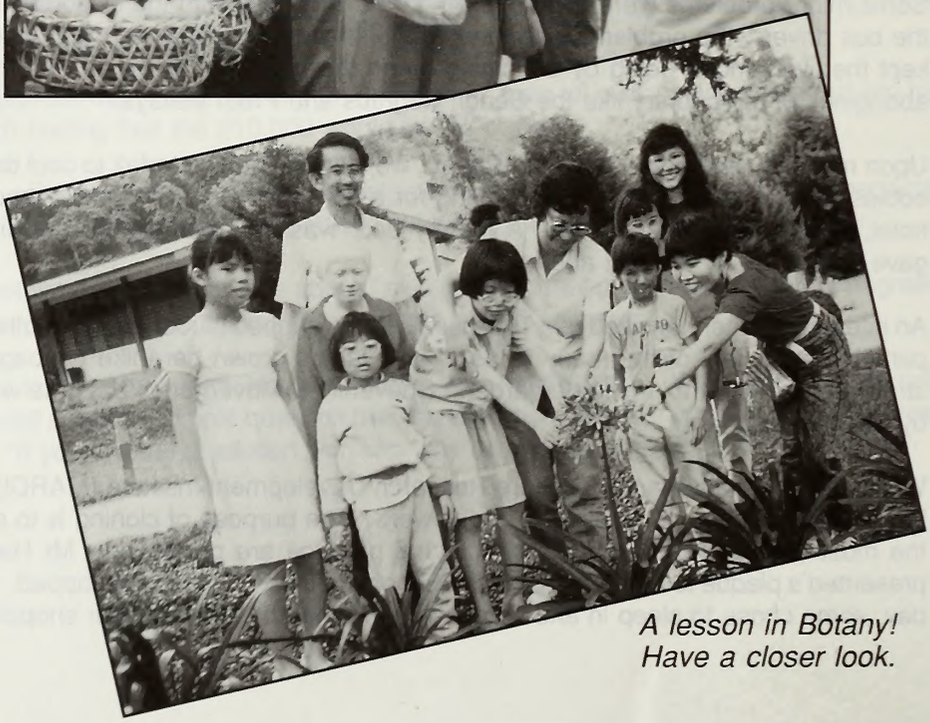
Upon reaching our hotel, Merlin Inn Resort, we stopped at a waterfall to cool down. Tired bodies! Sleepy eyes! Many of us longing for a rest. But when we finally made it to our hotel, we had only an hour to rest. A yummy lunch was well appreciated and a filled tummy gave us energy for the day ahead.

An interesting itinery awaited us. The visually handicapped students and adults - total and partial - had a feel of the many kinds of vegetables grown here like cabbages, radish, strawberries etc. at a vegetable garden. Souvenirs for loved ones at home were bought by many at Kea farm.

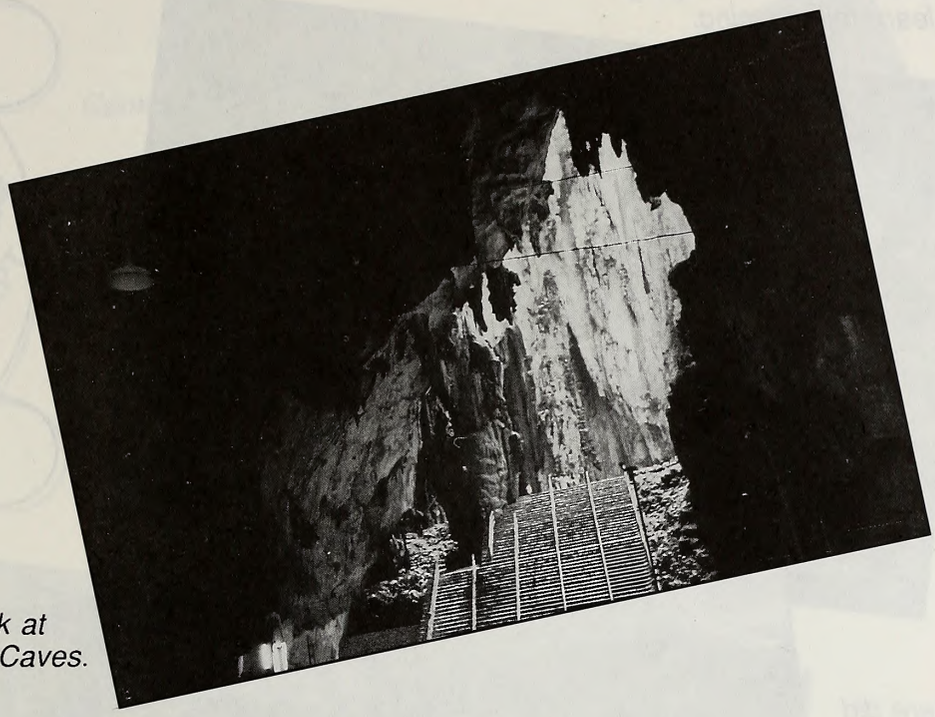
We visited the Malaysian Agriculture Research Development Institute (MARDI) where we learnt about cloning of vegetables and flowers. The purpose of cloning is to ensure that the most healthy genes of such agricultural produce are preserved. Mr Hashim Noor presented a plaque to the Principal of the School for the Visually Handicapped. To end the day, some chose to sleep in and some went to a nearby little town for shopping.

We've made it ..... on top of the world!

Taste and see. How about one for you?



A lesson in Botany! Have a closer look.



A look at Batu Caves.

On our return trip home, many woke up early. Much time was spent on travelling. We stopped at Kuala Lumpur and visited the Batu Caves. Brave and energetic teachers and students climbed the 272 steps to look at the massive outcrop of limestone cliffs. We had a late lunch at Malacca and last minute shopping in Johore Bahru.

We finally reached Singapore. Anxious parents welcomed their tired children home from such a long journey.

This trip was indeed a very enjoyable and educational one. Our only regret was that it ended too soon. Thanks to Nicholas Kiwi, our sponsor.

Comments

Goh Jin Huat: "I like the cool weather and travelling in the coach. I enjoyed the food and coffee most in the hotel."

Sim Lai Teong: "I had a personal experience to see how tea and vegetables were grown. I found the trip too short. It should have been longer."

Mr Lam Peng Cheong: "The trip was an unexpectedly exciting and enjoyable one."

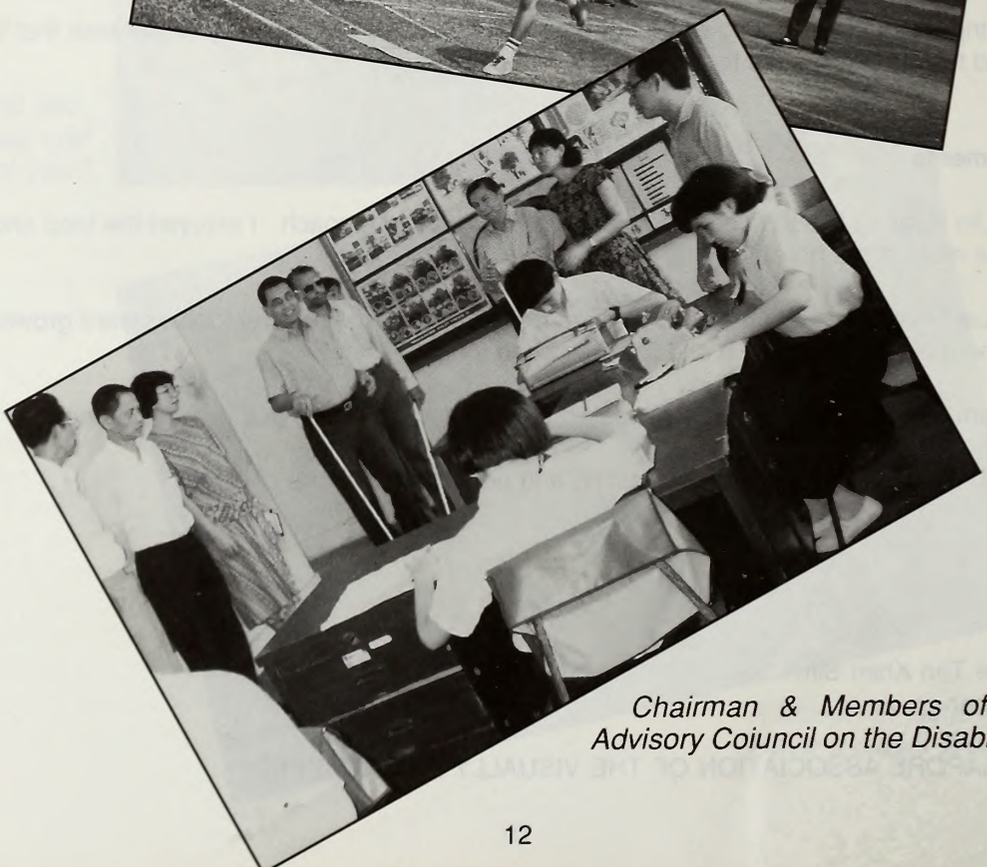
Mrs J. W. Loh: "the trip was interesting and educational for the children."

Grace Tan Khim Sim
Teacher

SINGAPORE ASSOCIATION OF THE VISUALLY HANDICAPPED

Lady Moore's visit ..... helping the kids learn folk-dancing.

Where did it go?



Chairman & Members of the Advisory Coiuncil on the Disabled...

DEC

TIES

NOV SEPT

MAR

FEB

Come on! It's almost finished!

That's the way, Aha! Aha! We do it...Temperamental artist at the national museum.

Still going strong almost at the summit of Bukit Timah Hill.

NATIONAL DAY CELEBRATION - A TRIP TO KUSU ISLAND

As part of its National Day Celebrations, a social picnic to Kusu Island was jointly organised by the Industrial Training Centre and the Community-Based Rehabilitation Services Department for our trainees and elderly clients on 5th August 1988.

The trainees and elderly clients were very excited about their trip as comments could be heard while sitting in the bus: "This is my first visit", said one trainee. Yet others mentioned that they would like to swim in the beach, watch the turtle, enjoy the sea breeze. Some would like to visit the temple and pray.

Upon arriving at Kusu Island, the excitement began with the hunting of favourite spots to settle down. Trainees and elderly clients were then accompanied by staff to the various interesting places.

After lunch, a sing-a-long session and swimming were organised for the trainees while the elderly clients preferred to sit down in the kampong style shade and enjoy the breeze and the serenity of the island.

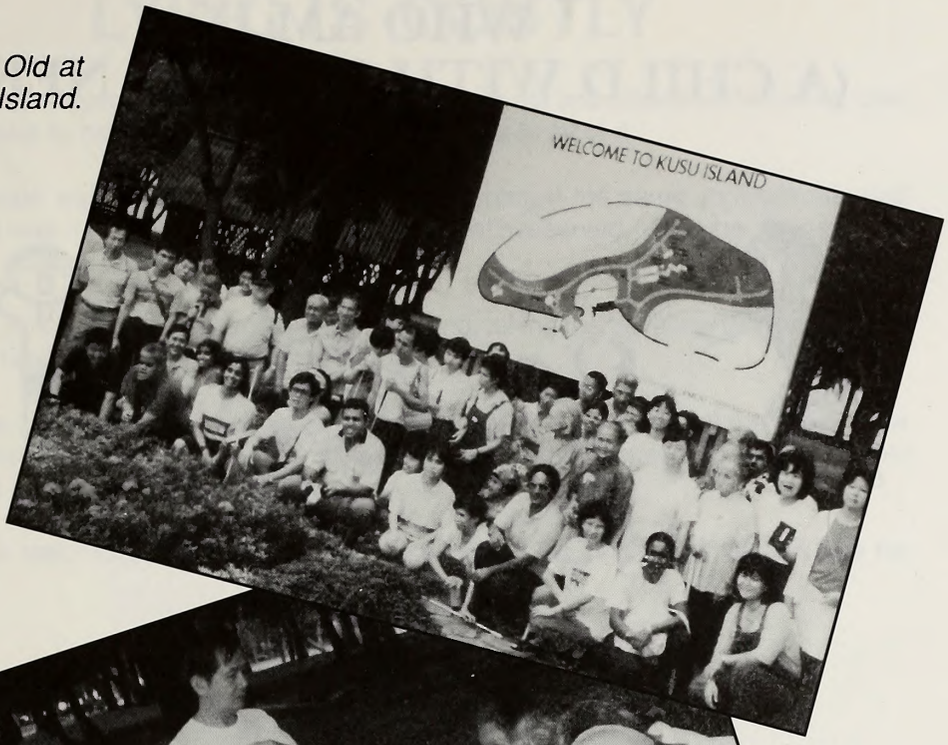
As the clock ticked 1500 hrs, there was a sense of disappointment for most of them as they had to make their journey back to the Association.

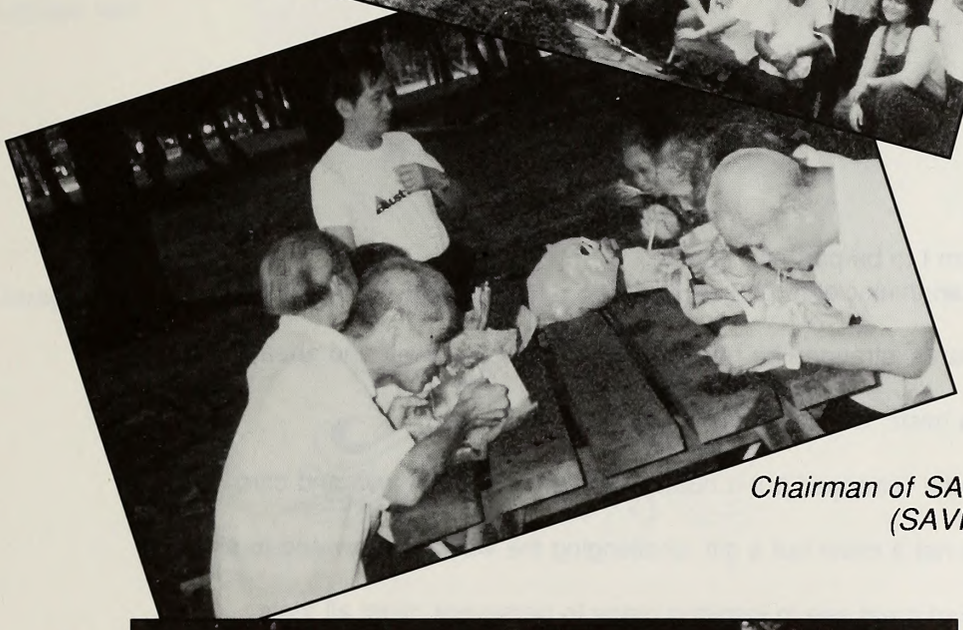
Despite the slight drizzle throughout most of the day, the trainees and elderly clients had a good time and enjoyed themselves.

Our thanks to Singapore Bus Service (1978) Ltd for so generously providing a complimentary bus to and from the World Trade Centre.

Kelvin Lim
Training Officer

Young and Old at Kusu Island.





Chairman of SAGE (SAVH)?

Listen to the Rhythm of the falling rain.

WHO AM I?
(A CHILD WITH SPECIAL NEEDS)

Who am I to be part of a people,
Who can think clear and sure?

How can a 'stranger' be part of a nation, which is swift and ahead?

Am I a misfit, am I of use?

You're no ''stranger' but a human creature worthy of love and care

You're not a misfit but a gift, challenging the world to grow and to share.

You're of great use in inspiring many to persevere midst all trials.

It's just that you're SPECIAL
And you'll always be a special blessing to others.
In your own special ways.

Rose Samuel
School for the Visually Handicapped
Tee Ching Assistant

LYING IS COSTLY

A selfish old man boarded a train, sat down in the best seat and placed his travelling case on the seat next to him because he didn't want anyone to sit in it.

Just as the train was about to leave, a young boy entered the same compartment and asked the old man if he could sit next to him. "That seat's reserved," said the old man. "My friend will be coming any moment."

"Then let me sit here till he comes," said the boy, and, taking the travelling bag and placing it on his lap, he sat down next to the old man.

Just then, the guard blew his whistle, and the train began to steam out of the station. As it began to move, the boy took the travelling case and, to the complete dismay of the old man, threw it out of the window.

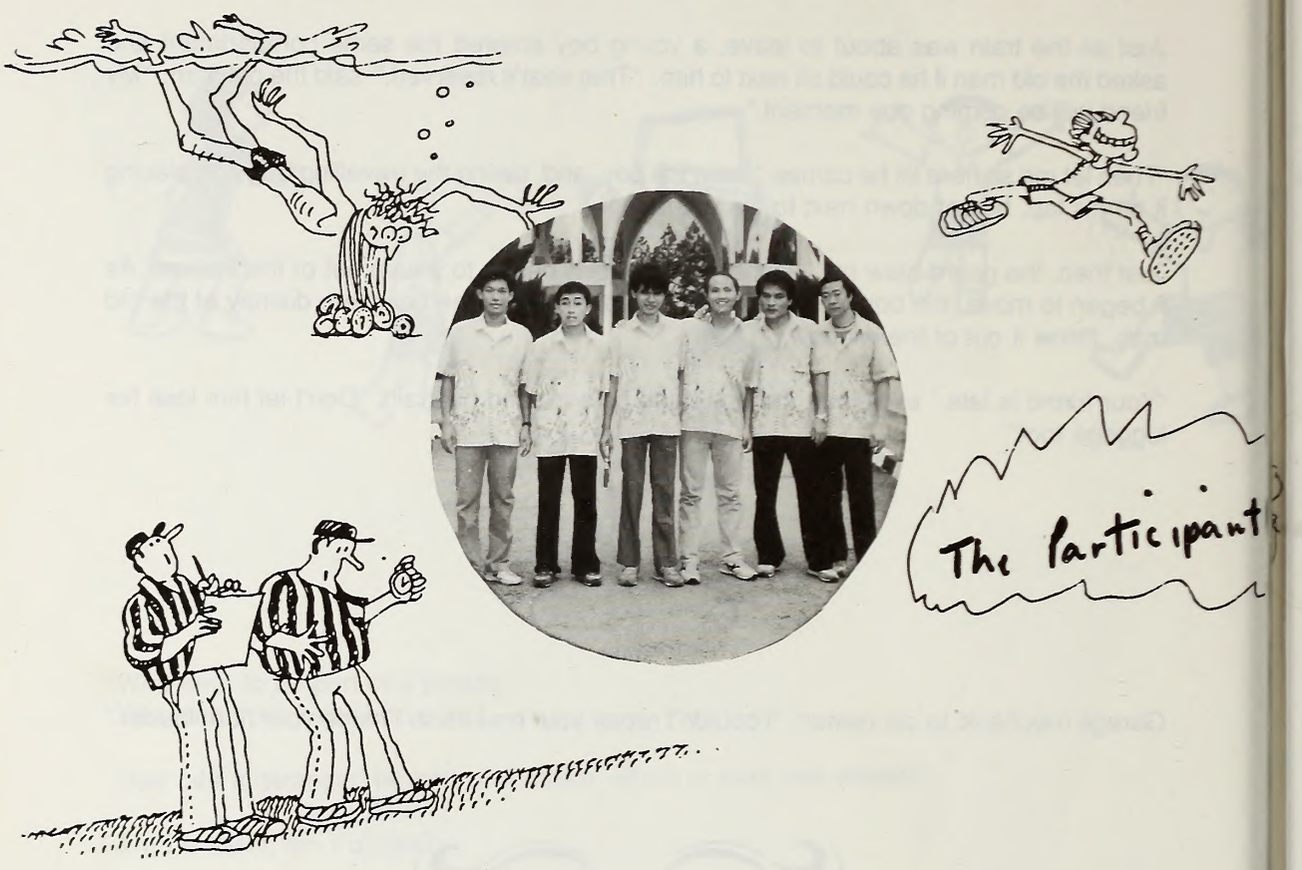
"Your friend is late," explained the boy, "and he's missed his train. Don't let him lose his luggage too!"

Garage mechanic to car owner: "I couldn't repair your brakes so I made your horn louder."

The tourists suitcase was covered with stickers from cities around the world. "Have you been to all those places?" he was asked.
"No. But my luggage has."

Sports

MALAYSIAN NATIONAL SPORTS MEET FOR THE DISABLED



The above meet was held in Kota Bahru, Kelantan from 10th to 12th April 1988. The Association was represented at the meet by seven visually handicapped participants. They were among the forty handicapped participants and thirteen officials that made up the Singapore C ontingent.

Prior to their departure for Kota Bahru, the selected visually handicapped participants went through two and a half weeks of intensive training from 23rd March to 7th April 1988 in the swimming and track and field events.

A school hostel was used to house the Singapore Contingent as well as the other Malaysian States Contingent. They found that the facilities in the games village were not satisfactory - poor housekeeping, inadequate supply of water, and in particular poor sanitation.

Despite the lack of facilities in the games village, our visually handicapped participants did very well to win three gold, one silver and four bronze medals in both swimming and track and field events during the 3 days of keen competition from the 13 Malaysian States team. The breakdown of the medal tally for our participants is as follows:-

TRACK AND FIELD EVENTS

Kua Cheng Kwang	Long Jump - First
Zaimoonisah	400 m - First
Zaimoonisah	100 m Sprint - Second
Ong Hock Bee	Long Jump - Third
Ong Hock Bee	High Jump - Third
Lim Ching Kiak	Javeline - Third

SWIMMING

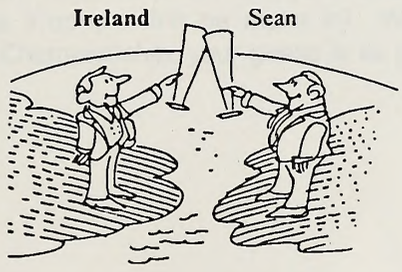
Kua Cheng Kwang	4 x 25 m Medley - First
Ong Hock Bee	4 x 25 m Medley - First
Yong Phen Chong	4 x 25 m Medley - First
Ng Ah Hock Daniel	4 x 25 m Medley - First
Yong Phen Chong	50 m Butterfly Stroke - Third

A big pat on the back for all of them and our congratulations.

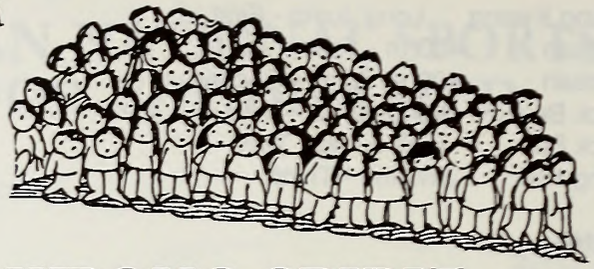
Kelvin Lim
Sports Representative

TOASTS AROUND THE WORLD

Italy	Salute
Israel	L'chayim
Japan	Banzai
Poland	Vivat
Scandinavia	Skoal
Spain	Salud



Brazil	Viva
China	Nien nien nue
England	Cheers
France	A votre sant'e
Germany	Prosit
Hawaii	Okole maluna
India	Jaikind



THE WRONG SPIRIT

The choir was in the middle of Handel's Messiah when a drunken man staggered into the church and shuffled towards the front of the sanctuary. A policeman who had been following him around to see that he did not get into trouble came up to him and took him by the arm.

"Leave me alone," the drunk said, "I want to sing in the choir."

"You can't" replied the policeman.

"I can't? Why not? I'm sure I can sing in the same spirit."

"No you can't," said the policeman. "You can't sing in the same spirit because you are filled with another spirit!"

SINGAPORE ASSOCAITION OF THE VISUALLY HANDICAPPED ANNUAL SCRABBLE CHAMPIONSHIP

Scrabble, a board game of word formation, is by far the most popular indoor game among the visually handicapped in Singapore. Its popularity can be measured by the fact that many of our visually handicapped members possess their own sets of the game. The game is also more frequently played when compared to other indoor games. Like all other indoor games, Scrabble is played for recreation as well as competition purposes.

The Association has been organising annual Scrabble competitions since 1983. This year, the Championship was held in October. Altogether, twelve of our visually handicapped members took part in the Annual Championship which was played on a round-robin system.

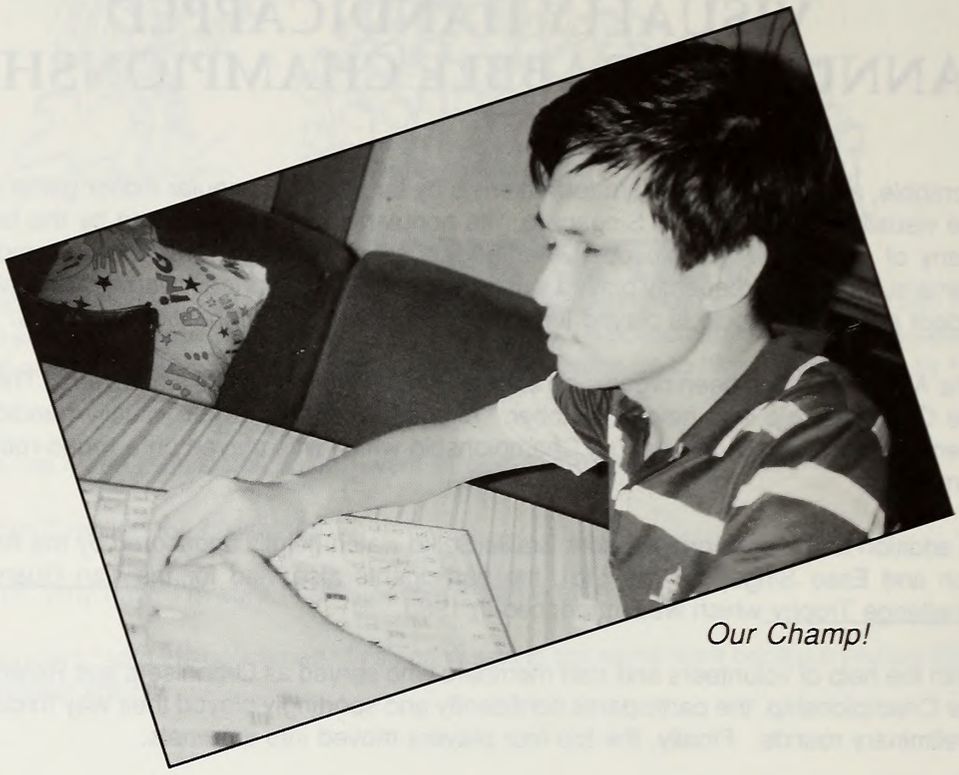
In addition to the cash prizes and a Braille Seiko watch (jointly sponsored by the Association and Esso Singapore Pte Ltd), the participants also vied for the Tan Guan Heng Challenge Trophy which was introduced in 1986.

With the help of volunteers and staff members who served as Organisers and Referees for the Championship, the participants confidently and sportingly played their way through the preliminary rounds. Finally, the top four players moved into the finals.

At the finals, the competition got tougher and the atmosphere became even more tense. Oblivious to what was going on in their midst, the four finalists struggled on, each hoping to outwit the other. Point for point, word for word, every move was vital. Every participant knew that an error could be an expensive one and may even result in tragedy.

But like all competitions, there must be a winner; and a winner there was. For the second year running, Mr Ng Tion Guan, reputed to be a top Scrabble player amongst the visually handicapped, emerged as the champion. One more win next year, and he will have the honour of keeping the first Challenge Trophy. Will he make it? With many others practising and gearing up for the next Championship, your guess is as good as mine!

Chong Jeo Ann
Librarian



Our Champ!

Their rewards.

A WORD TO THE SIGHTED: WHO ARE THE REALLY 'BLIND'?

Hellen Keller once said: 'Not blindness, but the attitude of the seeing to the blind is the hardest burden to bear.' It still is, according to many blind people I've spoken to.

One of the objectives of the Singapore Association of the Visually Handicapped is the rehabilitation and training of the visually handicapped in order that they may become useful digits in society.

Aware of the limitations faced by them, efforts are being made to further enhance their other capabilities. Moreover, science and technology have also helped make life more adaptable to the visually handicapped. Yet, at the end of it all, it is frustrating to know that society still places doubts and stigmas on the visually handicapped. Uppermost in the minds of many lies the limitations of the visually handicapped. It is more their disability than their ability that society looks upon them.

For example, it is still harder for the visually handicapped to find employment even though they have had the necessary training and possess the ability to do the same job as well, or perhaps better than a sighted person. This has resulted in some visually handicapped thinking of 'giving up' because the sighted have shrouded them in pity rather than give them a fair chance to prove their worth.

What can you as a sighted person do about this 'hardest burden to bear?'

Firstly, try and understand them. Remember he lives here, on this planet, just as you do.

Next, accept his handicap and its accompanying limitations. Look for his ability, not disability.

And, finally, give him a fair chance to prove himself to be a useful person, bearing in mind that he is a human being not void of making mistakes.

Here are some useful hints to help you understand the visually handicapped a little better:-

You need not raise your voice when talking to him: He is not deaf.

You need not fumble around to find substitutes for the words 'see' or 'blind': They are in his vocabulary too.

You should be considerate enough when entering a room to speak to him; and when leaving, tell him that you are doing so.

You should never grab his arm when walking together; it can throw him off balance: Offer him your arm so he can follow your movements. Pause for steps, kerbs or other obstacles. This will save a lot of unnecessary tripping and bumping.

And please - don't make silly comments like 'amazing' or 'miraculous' just because he has successfully achieved something. There's nothing amazing or miraculous about it.

And, finally, give him a chance and a rightful place in this world. Otherwise, when all is counted, it is not the visually handicapped persons who are blind, but really! It's the seeing who will be branded 'blind'.

TAKE TIME

Take time to think, it is the source of power
Take time to play, it is the secret of perpetual youth
Take time to read, it is the fountain of wisdom
Take time to pray, it is the greatest power on earth
Take time to love and be loved
Take time to be friendly, it is the road to happiness
Take time to laugh, it is the music of the soul
Take time to give, it is too short a day to be selfish
Take time to work, it is the prize of success
Take time for others, and you will always be in good company, and good spirit.

THE FUTURE OF BRAILLE

HISTORY

The Braille code, as we know it today, has come a long way since its conception by Louis Braille some 160 years ago.

It first began as a system of dots and dashes but is now formed from a combination of six dots in a cell. All in all, there are sixty-three possible combinations which can be used to form the different alphabets, digits and punctuation marks.

In the early days, the Braille code was produced by means of a slate and stylus. This was indeed a very cumbersome and time- consuming process as each dot had to be embossed individually.

However, in the past fifty years or so, the method of producing Braille had become more and more sophisticated. Several Braille- writing machines are now available in the market today ranging from the Stainsby to the Perkins Brailler. In addition, Braille can be produced much faster with the help of computers. Devices such as the Versa-Braille, Pocket Brailler, Keynote, and the Eureka A4 are also being used to help the visually handicapped produce Braille and inkprint copies of the same document as well.

The progress in the method of Braille production has led to some controversy over the adoption of the Braille code. Should the Standard English Braille code be adopted or Should it be the Literary American Braille code? In this paper, I will attempt to look at some of the major differences in both these codes and its implications for Braille users in international communications and new production methods.

DIGITS

Apart from the conventional method of representing digits, two different systems for the representation of digits are in use among blind Computer Programmers today - one in the USA and the other in Europe. The US system uses the dropped letters A to J to represent the digits one to zero whilst the European system uses the letters A to I with the addition of dot six to represent the digits one to nine with zero represented by the numeral sign. This poses tremendous problems for blind programmers particularly in the area of information exchange.

UPPER AND LOWER CASE LETTERS

The Literary American Braille code distinguishes between upper and lower case letters whilst the Standard English Braille code does not. This poses some problems for congenitally blind persons in that they are not familiar with the use of upper case letters. It is very important that blind persons familiarize themselves with the use of upper and lower case letters in order to communicate effectively with the sighted.

GRADE II BRAILLE

In Grade II or Contracted Braille, each Braille character could represent a word or two or more letters. It cannot be assumed that contractions are universal as it could vary from language to language and from country to country. Here again, Braille readers may find difficulty in gaining access to books from countries with a different system other than their own.

These differences have become more acute over the past few years with the advent of new

technology in Braille production. It is now possible to produce Braille by connecting a Braille embosser to a computer or paperless Braille devices rather than using a Perkins Brailler. It is also possible for a blind person to produce an inkprint document by connecting a printer to a paperless Braille device. All this means that the sighted can now assist in producing more Braille materials while it is possible for the visually handicapped to gain access to an unlimited source of printed materials either directly from a computer through a speech synthesizer or through a link-up between the computer and paperless Braille devices. In the case of transfering of data between the computer and paperless Braille Devices, it requires the use of Grade I or Uncontracted Braille. This means that the visually handicapped would have to adapt themselves to reading Grade I Braille. There should be no major problems with those who are already familiar with the Braille code. However, digits and mathematical notations are, in most instances, represented by the Nemeth code - the US system. Hence, it would be an asset for blind persons to familiarise themselves with this code.

As a result of these differences, product manufacturers have taylored their products accordingly to cater to the various groups of Braille users. For instance, the Versa-Braille and the Eureka A4 have incorporated the US system of representing digits and mathematical notations. In addition, a host of Braille translation programmes have been written - each with a different group of Braille users in mind.

RECOMMENDATIONS

In view of these differences, the following recommendations should be given some consideration.

1. MATHEMATICAL NOTATION

For the purposes of representing digits and other mathematical notation, the Nemeth code - the US system - should be used. This is because it conserves space and is a one-to-one correspondence between ASCII characters and Braille symbols. However, when reading Literary Braille, digits should be represented by the conventional two character cell i.e. the numeral sign and the letters A to J for one to zero.

2. UPPER CASE DISTINCTION

Visually handicapped persons should be aware of the importance of using upper and lower case letters. Hence, we should adopt this distinction right from the beginning - at Junior School. It is only when they are familiar with the use of upper and lower case letters that they will be able to communicate effectively through the printed media with their sighted counterparts.

CONCLUSION

Although computers, speech synthesizers and paperless Braille devices are readily available today, not all visually handicapped persons can afford such luxuries. Hence, Braille, as a means of communications for blind people, must and will still remain. However, to what extent the Braile code is to be modified remains a central issue for many countries. Nevertheless, in the interest of promoting better communications amongst blind people all over the world, the adoption of a common Braille code should be agreed upon as soon as possible.

However, there should not be a drastic change in the Braille code. In my view, Grade II Braille, as we know it today, will continue to be in use. However, Grade I Braille will be used by many Braille users for the production of Braille and/or inkprint materials through the use of paperless Braille devices. What is left to be agreed upon is the way in which mathematical notations should be represented.

Albert Toh

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for a

Happy New Year

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